Fill in this information to identify your c			
United States Bankruptcy Court for the: NORTHERN DISTRICT OF TEXAS			
Case number (if known):	Chapter you are filing under:		
	✓ Chapter 7		
	Chapter 11		
	Chapter 12		Check if this is an
	Chapter 13		amended filing

Official Form 101

Voluntary Petition for Individuals Filing for Bankruptcy

04/20

The bankruptcy forms use you and Debtor 1 to refer to a debtor filing alone. A married couple may file a bankruptcy case together--called a joint case--and in joint cases, these forms use you to ask for information from both debtors. For example, if a form asks, "Do you own a car," the answer would be yes if either debtor owns a car. When information is needed about the spouses separately, the form uses Debtor 1 and Debtor 2 to distinguish between them. In joint cases, one of the spouses must report information as Debtor 1 and the other as Debtor 2. The same person must be Debtor 1 in all of the forms.

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write your name and case number (if known). Answer every question.

Part 1: **Identify Yourself** About Debtor 1: About Debtor 2 (Spouse Only in a Joint Case): Your full name Write the name that is on your Christopher Crystal government-issued picture First Name First Name identification (for example, your driver's license or Middle Name Middle Name passport). Grider Grider Bring your picture Last Name Last Name identification to your meeting with the trustee. Suffix (Sr., Jr., II, III) Suffix (Sr., Jr., II, III) All other names you have used in the last 8 First Name First Name years Middle Name Middle Name Include your married or maiden names. Last Name Last Name Only the last 4 digits of $xxx - xx - 4 \qquad 0 \qquad 5$ xxx - xx - 2 6 4 0your Social Security number or federal OR OR Individual Taxpayer Identification number 9xx - xx -9xx - xx -(ITIN) Any business names I have not used any business names or EINs. I have not used any business names or EINs. and Employer **Identification Numbers** Business name Business name (EIN) you have used in the last 8 years Business name Business name Include trade names and doing business as names Business name Business name

Case 21-31704-sgj7 Doc 1 Filed 09/24/21 Entered 09/24/21 10:12:48 Desc Main Document Page 2 of 67

	btor 1 btor 2	Christopher Grider Crystal Grider					Case nu	mber (if known))	
			About Debtor 1:			Abo	out Debtor 2 (S	Spouse Only i	n a Joint Case):	
			EIN				EIN	. 		
			EIN				- EIN			
5.	Where	you live						ebtor 2 lives a	t a different a	ddress:
			830	FM 1950						
			Num	nber Street			Num	nber Street		
			Ede	dy	тх	76524	_			
			City		State	ZIP Code	City		State	ZIP Code
			Cou	Lennan nty			Cou	inty		
			If your mailing address is different from the one above, fill it in here. Note that the court will send any notices to you at this mailing address.				fror will	If Debtor 2's mailing address is different from yours, fill it in here. Note that the court will send any notices to you at this mailing address.		
			Number Street			Num	nber Street			
			P.O.	. Box			P.O.	. Box		
			City		State	ZIP Code	City		State	ZIP Code
6.		ou are choosing strict to file for	Che	eck one:			Che	eck one:		
	bankru	uptcy	V	Over the last 180 petition, I have li than in any other	ved in this		\square		180 days befo e lived in this her district.	-
				I have another re (See 28 U.S.C. §		lain.		I have anothe (See 28 U.S.0	er reason. Exp C. § 1408.)	lain.
P	art 2:	Tell the Court Ab	out Y	our Bankrupt	cy Case					
7.	Bankrı	napter of the uptcy Code you		k one: (For a brief ankruptcy (Form 2						for Individuals Filing
	are che under	oosing to file	$\overline{\mathbf{Q}}$	Chapter 7						
				Chapter 11						
				Chapter 12						
				Chapter 13						

Case 21-31704-sgj7 Doc 1 Filed 09/24/21 Entered 09/24/21 10:12:48 Desc Main Document Page 3 of 67

		stopher Grider stal Grider	Case number (if known)								
8.	How you will	How you will pay the fee		court pay w	for more detai vith cash, cash	ls about how y ier's check, or	you may pay. money order.	Typical If your	ly, if you are pay	ne clerk's office in ving the fee yours mitting your payn nted address.	self, you may
							•		his option, sign a al Form 103A).	and attach the Ap	oplication for
				By law than fee in	w, a judge may 150% of the of installments).	y, but is not re ficial poverty If you choos	quired to, waiv line that applie	e your to you not you must you must	fee, and may do ur family size an at fill out the App	you are filing for so only if your ir d you are unable dication to Have	come is less to pay the
		Have you filed for bankruptcy within the last 8 years?	$\overline{\mathbf{A}}$	No							
				Yes.							
			Dist	rict _				When		Case number	
			Diet	r! a.4							
			Dist	—				vvnen	MM / DD / YYYY	Case number	
			Dist	rict _				When		Case number	
									MM / DD / YYYY		
10.	Are any bank cases pendir		$ \sqrt{} $	No							
	filed by a spo	-		Yes.							
	not filing this		Deb	tor _					Relationsh	nip to you	
	partner, or by		Dist	rict				When		Case number,	
	affiliate?			_					MM / DD / YYYY		
			Deb	tor _					Relationsh	nip to you	
			Dist	rict				When		Case number,	
									MM / DD / YYYY		
11.	Do you rent y residence?	our/our/		No. Yes.	Go to line 12 Has your land		d an eviction ju	ıdgmen	t against you?		
					Yes. Fil		atement About		_	Against You (Foi	m 101A)

Case 21-31704-sgj7 Doc 1 Filed 09/24/21 Entered 09/24/21 10:12:48 Desc Main Document Page 4 of 67

	tor 1 Christopher Grider tor 2 Crystal Grider				Cas	e number (if known)	
P	Report About A	ny Bı	ısine	sses You Own as a	Sole Proprieto	or	
12.	Are you a sole proprietor of any full- or part-time business?			Go to Part 4. Name and location of bu	usiness		
	A sole proprietorship is a			Kissing Tree Vineya	ards		
	business you operate as an individual, and is not a			830 FM 1950			
	separate legal entity such as a corporation, partnership, or LLC.			Number Street			
				Eddy		TX	76254
	If you have more than one			City		State	ZIP Code
	sole proprietorship, use a separate sheet and attach it to this petition.			Check the appropriate	box to describe you	r business:	
					ness (as defined in 1	11 U.S.C. § 101(27A))	
					•	in 11 U.S.C. § 101(51B	9))
				Stockbroker (as d	efined in 11 U.S.C.	§ 101(53A))	
					r (as defined in 11 l	J.S.C. § 101(6))	
				None of the above	9		
	Are you filing under Chapter 11 of the Bankruptcy Code, and are you a small business debtor or a debtor as defined by 11 U.S.C. § 1182(1)? For a definition of small business debtor, see 11 U.S.C. § 101(51D).	are mos	a sma st rece	Il business debtor or you	are choosing to pro- ent of operations, co ot exist, follow the pr	oceed under Subchapte ash-flow statement, and	nes. If you indicate that you r V, you must attach your d federal income tax return 1116(1)(B).
		_		•	·		
			No.	I am filing under Chapter 11, but I am NOT a small business debtor according to the definiti the Bankruptcy Code.			
			Yes.			ousiness debtor accord proceed under Subchap	ing to the definition in the ter V of Chapter 11.
			Yes.	I am filing under Chapt Bankruptcy Code, and	•	according to the definition	• ,
P	Report If You Ov	wn o	r Hav	e Any Hazardous P	Property or Any	Property That Ne	eds Immediate Attentio
14.	Do you own or have any property that poses or is alleged to pose a threat of imminent and identifiable		No Yes.	What is the hazard?			
	hazard to public health or safety? Or do you own any property that needs immediate attention?			If immediate attention i	s needed, why is it i	needed?	
	For example, do you own perishable goods, or livestock that must be fed, or			Where is the property?			
	a building that needs urgent repairs?				Number Street		
					City		State ZIP Code

	btor 1 Christophe btor 2 Crystal Gri			Cas	se number (if kno	own)		
P	art 5: Explain	Your Efforts to Re	eceive a Briefing About Cred	it Co	unseling			
w ha br cr cc	Tell the court whether you have received a briefing about credit counseling.	counseling age filed this bankru certificate of co Attach a copy of	offing from an approved credit ncy within the 180 days before I uptcy petition, and I received a	You	u must check one I received a brie counseling age filed this bankru certificate of co Attach a copy of	fing from an approved credit ncy within the 180 days before I uptcy petition, and I received a		
	that you receive a briefing about credit counseling before you file for	☐ I received a brie counseling age	efing from an approved credit ncy within the 180 days before I uptcy petition, but I do not have		☐ I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, but I do not have a certificate of completion.			
	bankruptcy. You must truthfully check one of the following choices.	Within 14 days a	Within 14 days after you file this bankruptcy petition, you MUST file a copy of the certificate and payment plan, if any.			Within 14 days after you file this bankruptcy petition you MUST file a copy of the certificate and payment plan, if any.		
	If you cannot do so, you are not eligible to file. If you file anyway, the court can dismiss your case, you will lose whatever filing fee you paid, and your creditors can begin collection activities again.	services from a unable to obtain days after I mad	day temporary waiver of the ach a separate sheet explaining what e to obtain the briefing, why you obtain it before you filed for what exigent circumstances		☐ I certify that I asked for credit counseling services from an approved agency, but was unable to obtain those services during the 7 days after I made my request, and exigent circumstances merit a 30-day temporary waiver of the requirement.			
		To ask for a 30-c requirement, atta efforts you made were unable to o			To ask for a 30-day temporary waiver of the requirement, attach a separate sheet explaining wha efforts you made to obtain the briefing, why you were unable to obtain it before you filed for bankruptcy, and what exigent circumstances required you to file this case.			
		dissatisfied with	ne dismissed if the court is your reasons for not receiving a but filed for bankruptcy.	Your case may be dismissed if the court is dissatisfied with your reasons for not receiving a briefing before you filed for bankruptcy.				
		still receive a bri You must file a calong with a cop	risfied with your reasons, you must be sefing within 30 days after you file. Sertificate from the approved agency, by of the payment plan you y. If you do not do so, your case ad.	If the court is satisfied with your reasons, you must still receive a briefing within 30 days after you file. You must file a certificate from the approved agency along with a copy of the payment plan you developed, if any. If you do not do so, your case may be dismissed.				
		•	the 30-day deadline is granted only limited to a maximum of 15 days.		•	the 30-day deadline is granted only limited to a maximum of 15 days.		
		☐ I am not require credit counselir	ed to receive a briefing abouting because of:		I am not require credit counselir	d to receive a briefing about		
		☐ Incapacity.	I have a mental illness or a mental deficiency that makes me incapable of realizing or making rational decisions about finances.		☐ Incapacity.	I have a mental illness or a mental deficiency that makes me incapable of realizing or making rational decisions about finances.		
		☐ Disability.	My physical disability causes me to be unable to participate in a briefing in person, by phone, or through the internet, even after I reasonably tried to do so.		☐ Disability.	My physical disability causes me to be unable to participate in a briefing in person, by phone, or through the internet, even after I reasonably tried to do so.		
		☐ Active duty	I am currently on active military duty in a military combat zone.		Active duty	I am currently on active military duty in a military combat zone.		
		If you believe yo	u are not required to receive a		If you believe yo	u are not required to receive a		

briefing about credit counseling, you must file a

motion for waiver of credit counseling with the court.

briefing about credit counseling, you must file a

motion for waiver of credit counseling with the court.

Case 21-31704-sgj7 Doc 1 Filed 09/24/21 Entered 09/24/21 10:12:48 Desc Main Document Page 6 of 67

	otor 1 otor 2	Christopher Grider Crystal Grider				Case number (if	know	n)		
P	art 6:	Answer These G	Quest	ions for Reporting P	urpos	ses				
16.	What ki have?	nd of debts do you	16a.	•	vidual pr o.	sumer debts? Consumer de imarily for a personal, family,		re defined in 11 U.S.C. § 101(8) usehold purpose."		
			16b.	Are your debts primarily business debts? Business debts are debts that you incurred to obtain money for a business or investment or through the operation of the business or investment. ☐ No. Go to line 16c. ☐ Yes. Go to line 17.						
			16c.	State the type of debts	you owe	e that are not consumer or bu	sines	s debts.		
17.	-	re you filing under hapter 7? No. I am not filing under Chapter 7. Go to line 18.								
	any exe exclude adminis are paid availab	estimate that after empt property is ed and strative expenses d that funds will be le for distribution cured creditors?	☑	ŭ	•	•	•	xempt property is excluded and to distribute to unsecured creditors?		
18.		any creditors do imate that you		1-49 50-99 100-199 200-999		1,000-5,000 5,001-10,000 10,001-25,000		25,001-50,000 50,001-100,000 More than 100,000		
19.		uch do you e your assets to th?		\$0-\$50,000 \$50,001-\$100,000 \$100,001-\$500,000 \$500,001-\$1 million		\$1,000,001-\$10 million \$10,000,001-\$50 million \$50,000,001-\$100 million \$100,000,001-\$500 million		\$500,000,001-\$1 billion \$1,000,000,001-\$10 billion \$10,000,000,001-\$50 billion More than \$50 billion		
20.		uch do you e your liabilities to		\$0-\$50,000 \$50,001-\$100,000 \$100,001-\$500,000 \$500,001-\$1 million		\$1,000,001-\$10 million \$10,000,001-\$50 million \$50,000,001-\$100 million \$100,000,001-\$500 million		\$500,000,001-\$1 billion \$1,000,000,001-\$10 billion \$10,000,000,001-\$50 billion More than \$50 billion		

Case 21-31704-sgj7 Doc 1 Filed 09/24/21 Entered 09/24/21 10:12:48 Desc Main Document Page 7 of 67

Debtor 1 Debtor 2	Christopher Grider Crystal Grider		Case number (if known)				
Part 7:	Sign Below						
For you		I have examined this petition, and I declare used and correct.	under penalty of perjury that the information provided is true				
		If I have chosen to file under Chapter 7, I am aware that I may proceed, if eligible, under Chapter 7, 11, 12, or 13 of title 11, United States Code. I understand the relief available under each chapter, and I choose to proceed under Chapter 7.					
		If no attorney represents me and I did not pay or agree to pay someone who is not an attorney to help me fill out this document, I have obtained and read the notice required by 11 U.S.C. § 342(b).					
		I request relief in accordance with the chapter of title 11, United States Code, specified in this petition.					
		I understand making a false statement, concealing property, or obtaining money or property by fraud in connection with a bankruptcy case can result in fines up to \$250,000, or imprisonment for up to 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571.					
		X /s/ Christopher Grider Christopher Grider, Debtor 1	X /s/ Crystal Grider Crystal Grider, Debtor 2				
		Executed on 09/24/2021 MM / DD / YYYY	Executed on 09/24/2021 MM / DD / YYYY				

Case 21-31704-sgj7 Doc 1 Filed 09/24/21 Entered 09/24/21 10:12:48 Desc Main Document Page 8 of 67

Debtor 1 Debtor 2	Christopher Grider Crystal Grider		Case number (if know	n)
For your attorney, if you are represented by one fyou are not represented by an attorney, you do not need to file this page.		I, the attorney for the debtor(s) named in the eligibility to proceed under Chapter 7, 11, or elief available under each chapter for which the debtor(s) the notice required by 11 U.S certify that I have no knowledge after an in is incorrect.	12, or 13 of title 11, United Stach the person is eligible. I also c.C. § 342(b) and, in a case in	tes Code, and have explained the operatify that I have delivered to which § 707(b)(4)(D) applies,
		X /s/ Andrew Oostdyk Signature of Attorney for Debtor	Date	09/24/2021 MM / DD / YYYY
		Andrew Oostdyk Printed name		
		C.W. Martin Law Office, PLLC Firm Name 701 W Belknap St		
		Number Street		
		Fort Worth	TX	76102
		City Contact phone (817) 813-7777	State Email address andy €	ZIP Code
		24051139 Bar number	State	_

Fill in this info	ormation to ide	ntify your	case and this filing:			
Debtor 1	Christopher		Grider			
Debior 1	First Name	Middle Nan				
Debtor 2	Crystal		Grider			
(Spouse, if filing)		Middle Nan				
United States Bar	nkruptcy Court for th	ne: NORTHI	ERN DISTRICT OF TEXAS	<u> </u>		
Case number					□ Chook	if this is an
(if known)					_	if this is an ed filing
Official Forms	400 A /D					
Official Form						
Schedule A/	B: Property					12/15
filing together, bot sheet to this form.	th are equally resp On the top of any	onsible for s additional p	pest. Be as complete and ac supplying correct information pages, write your name and Building, Land, or Othe	on. If more case numb	space is needed, attach a s per (if known). Answer eve	separate ry question.
30	201120 2001110		Januarig, Laria, or Othio			
✓ No. Go t	, ,	•	nterest in any residence, bu	ilding, land	l, or similar property?	
			for all of your entries from lt 1. Write that number here.			\$0.00
Part 2: Des	scribe Your Vel	hicles			•	
you own that some	one else drives. If y	you lease a v	erest in any vehicles, wheth ehicle, also report it on Scheonicles, motorcycles	-	_	•
□ No ☑ Yes		·				
3.1. Make:	Dodge		no has an interest in the projeck one.	perty?	Do not deduct secured clair amount of any secured clair	ms on <i>Schedule D:</i>
Model:	Ram		Debtor 1 only		Creditors Who Have Claims	
Year:	2016	_	Debtor 2 only Debtor 1 and Debtor 2 only		Current value of the entire property?	Current value of the portion you own?
Approximate mileag	ge: 125,000	<u>\</u>	At least one of the debtors a	ind another	\$20,000.00	\$20,000.00
Other information:		_				
2016 Dodge Ran miles)	n (approx. 125,00	00 🗹	Check if this is community (see instructions)	property		
3.2.		Wh	no has an interest in the pro	perty?	Do not deduct secured clair	ms or exemptions. Put the
Make:	Mercedes	Ch	eck one.		amount of any secured clair	
Model:	III 000		Deptor 1 only		Current value of the	
Year:	2011	_ □	Debtor 2 only Debtor 1 and Debtor 2 only		Current value of the entire property?	Current value of the portion you own?
Approximate mileag	ge: 95,000	— 四	At least one of the debtors a	ınd another	\$6,000.00	\$6,000.00
Other information:						<u> </u>
2011 Mercedes I 95,000 miles)	ML 350 (approx.		Check if this is community (see instructions)	property		

Case 21-31704-sgj7 Doc 1 Filed 09/24/21 Entered 09/24/21 10:12:48 Desc Main Document Page 10 of 67

	otor 1 otor 2	Christophe Crystal Grid		Cas	se number (if known)			
4.		oles: Boats, trai		nd other recreational vehicles, other veh vatercraft, fishing vessels, snowmobiles, m				
	ke: del: ar: er inform	4 V 20°	inese C Vheeler C 18	At least one of the debtors and another	Do not deduct secured clair amount of any secured clair Creditors Who Have Claims Current value of the entire property? \$500.00	ms on Schedule D:		
	ke: del: ar: er inform	4 V 201	inese C Vheeler C 18	The has an interest in the property? heck one. Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only At least one of the debtors and another	Do not deduct secured clair amount of any secured clair Creditors Who Have Claims Current value of the entire property? \$500.00	ms on <i>Schedule D:</i>		
Do	entries	Describe	your Personal an	Check if this is community property (see instructions) In for all of your entries from Part 2, inclurt 2. Write that number here d Household Items Test in any of the following items?		\$27,000.00 Current value of the portion you own? Do not deduct secured claims or exemptions.		
7.	Examp No Ye Electro	onics Describe	See continuation pure and radios; audio, vid			\$1,900.00		
		o s. Describe	See continuation p	· ·	piayers, gaines	\$780.00		
 8. Collectibles of value Examples: Antiques and figurines; paintings, prints, or other artwork; books, pictures, or other art objects; stamp, coin, or baseball card collections; other collections, memorabilia, collectibles No Yes. Describe Books, Framed Pictures 								
9.	Examp	canoes an	otographic, exercise, a	nd other hobby equipment; bicycles, pool table; musical instruments	ables, golf clubs, skis;	I		
	☐ No ✓ Ye		Miscellaneous exe	ercise and sports equipment		\$500.00		

Case 21-31704-sgj7 Doc 1 Filed 09/24/21 Entered 09/24/21 10:12:48 Desc Main Document Page 11 of 67

	totor 1 Christopher Grider Crystal Grider Case number (if known)	
10.	Firearms Examples: Pistols, rifles, shotguns, ammunition, and related equipment	
	✓ No ☐ Yes. Describe	<u> </u>
11.	Clothes Examples: Everyday clothes, furs, leather coats, designer wear, shoes, accessories	
	No Yes. Describe Men's, Women's and children's clothing	\$300.00
12.	Jewelry Examples: Everyday jewelry, costume jewelry, engagement rings, wedding rings, heirloom jewelry, watches, ge gold, silver	ems,
	No ✓ Yes. Describe Wedding Rings	\$1,000.00
13.	Non-farm animals Examples: Dogs, cats, birds, horses	
	✓ No Yes. Describe	
14.	Any other personal and household items you did not already list, including any health aids you did not list	
	✓ No ☐ Yes. Give specific	
	information	
15.	Add the dollar value of all of your entries from Part 3, including any entries for pages you have attached for Part 3. Write the number here	\$4,780.00
Pa	art 4: Describe Your Financial Assets	
Do y	you own or have any legal or equitable interest in any of the following?	Current value of the portion you own? Do not deduct secured claims or exemptions.
16.	Cash Examples: Money you have in your wallet, in your home, in a safe deposit box, and on hand when you file your petition	
	✓ No ☐ Yes	
17.	Deposits of money Examples: Checking, savings, or other financial accounts; certificates of deposit; shares in credit unions, brokerage houses, and other similar institutions. If you have multiple accounts with the same institution, list each.	
	✓ No ☐ Yes Institution name:	

Case 21-31704-sgj7 Doc 1 Filed 09/24/21 Entered 09/24/21 10:12:48 Desc Main Document Page 12 of 67

	tor 1 tor 2	Christopher Grider	der		Case number (if known)	
18.	Bonds,	, mutual funds, or p	oublicly traded stock	···s		
	Exampl	les: Bond funds, inv	estment accounts wit	h brokerage firms, money market	accounts	
	✓ No ☐ Yes	S	Institution or issuer	name:		
19.	•	· ·	and interests in inc	orporated and unincorporated lenture	businesses, including	
	□ No					
		s. Give specific ormation about				
		:m	Name of entity:		% of ownership:	
			1% Interest in Kis	ssing Tree Vineyards, LLC	1%	\$0.00
20.	Negotia	able instruments incl	te bonds and other n	negotiable and non-negotiable in cashiers' checks, promissory not t transfer to someone by signing	tes, and money orders.	
	☑ No					
	info	s. Give specific ormation about				
	the	m	Issuer name:			
21.		nent or pension ac les: Interests in IRA profit-sharing pl	, ERISA, Keogh, 401	(k), 403(b), thrift savings accounts	s, or other pension or	
	□ No					
	بغا	s. List each count separately.	Type of account:	Institution name:		
		1	Retirement account:	Retirement account - TRS		\$29,567.00
		1	Retirement account:	Retirement account - TRS		\$20,791.00
22.	Your sh Example		eposits you have mad	e so that you may continue servicent, public utilities (electric, gas, v		
	☑ No					
	ш	S		stitution name or individual:		
23.	☑ No	•		ment of money to you, either for l	life or for a number of years)	
	_		Issuer name and de			
24.			IRA, in an account in PA(b), and 529(b)(1).	n a qualified ABLE program, or	under a qualified state tuition pro	gram.
	✓ No		Institution name and	description. Separately file the r	records of any interests. 11 U.S.C.	§ 521(c)
25.		, equitable or future s exercisable for yo		ty (other than anything listed in	line 1), and rights or	
	☑ No					
	_	s. Give specific ormation about them	1			
26.				s, and other intellectual propert oceeds from royalties and licensing		
	✓ No					
		s. Give specific ormation about them	1			
27.			other general intanges, exclusive licenses,	=	, liquor licenses, professional licens	ses
	☑ No					
		 Give specific ormation about them 				

Case 21-31704-sgj7 Doc 1 Filed 09/24/21 Entered 09/24/21 10:12:48 Desc Main Document Page 13 of 67

	tor 1 tor 2	Christopher Grider Crystal Grider	Case number (if known)		
Mor	ney o	r property owed to you?		Current value of the portion you own? Do not deduct secured claims or exemptions.	
28.	Tax	refunds owed to you			
	_	No Yes. Give specific information about them, including whether you already filed the returns and the tax years	Sta	ederal: tate: ocal:	_
29.	Exa	nily support mples: Past due or lump sum alin No	mony, spousal support, child support, maintenance, divorce settlement, pro	roperty settlement	
	لخا	Yes. Give specific information	Alimony:		_
			Maintenance:	:	_
			Support:		_
			Divorce settler	ement:	_
			Property settle	lement:	_
	☑		insurance payments, disability benefits, sick pay, vacation pay, workers' curity benefits; unpaid loans you made to someone else		
31.	Exa	rests in insurance policies mples: Health, disability, or life in No Yes. Name the insurance company of each policy	nsurance; health savings account (HSA); credit, homeowner's, or renter's in	insurance	
			mpany name: Beneficiary:	Surrender or refund value):
32.	If yo	ou are the beneficiary of a living tr tled to receive property because s	e you from someone who has died rust, expect proceeds from a life insurance policy, or are currently someone has died		
	~	No Yes. Give specific information			_
33.	Exa	-	ner or not you have filed a lawsuit or made a demand for payment isputes, insurance claims, or rights to sue		
		Yes. Describe each claim			_
34.	righ	er contingent and unliquidated its to set off claims No	claims of every nature, including counterclaims of the debtor and		
		Yes. Describe each claim			_
35.	_	financial assets you did not all	ready list	_	
	~	No Yes. Give specific information			_

Case 21-31704-sgj7 Doc 1 Filed 09/24/21 Entered 09/24/21 10:12:48 Desc Main Document Page 14 of 67

	tor 1 tor 2	Christopher Grider Crystal Grider Case number (if known)	
36.		e dollar value of all of your entries from Part 4, including any entries for pages you have d for Part 4. Write that number here	\$50,358.00
Pa	art 5:	Describe Any Business-Related Property You Own or Have an Interest In. List any	real estate in Part 1.
37.	□ No	own or have any legal or equitable interest in any business-related property? Go to Part 6. Go to line 38.	
20	Accoun	nts receivable or commissions you already earned	Current value of the portion you own? Do not deduct secured claims or exemptions.
30.	No No	its receivable of commissions you already earned	
		s. Describe	
39.	Examp	equipment, furnishings, and supplies es: Business-related computers, software, modems, printers, copiers, fax machines, rugs, telephones, desks, chairs, electronic devices	
	☐ No ☑ Yes	Describe Office Furniture, Printers, iPad	\$1,285.00
40.	Machir	ery, fixtures, equipment, supplies you use in business, and tools of your trade	
	✓ No ☐ Yes	s. Describe	
41.	Invento	ry	
	□ No ✓ Yes	s. Describe Unbottled raw wine in barrels - approximately 20 bbls	\$10,000.00
42.	Interes	ts in partnerships or joint ventures	
	✓ No ☐ Yes	s. Describe Name of entity: % of ownership:	
43.	Custon	ner lists, mailing lists, or other compilations	
	✓ No ☐ Yes	Do your lists include personally identifiable information (as defined in 11 U.S.C. § 101(41A))? No Yes. Describe	
44.	Any bu	siness-related property you did not already list	
	✓ No ☐ Yes	s. Give specific information.	
45.		e dollar value of all of your entries from Part 5, including any entries for pages you have d for Part 5. Write that number here	\$11,285.00
Pa		Describe Any Farm- and Commercial Fishing-Related Property You Own or Have an If you own or have an interest in farmland, list it in Part 1.	Interest In.
46.	Do you	own or have any legal or equitable interest in any farm- or commercial fishing-related property?	
	_	Go to Part 7. Go to line 47.	

Case 21-31704-sgj7 Doc 1 Filed 09/24/21 Entered 09/24/21 10:12:48 Desc Main Document Page 15 of 67

Current value of the portion you own? Current value of the portion you own?	Debtor 1		Christopher Grider		
## Portion you own? Do not deduct secured claims or exemptions.	Deb	tor 2	Crystal Grider	Case number (if known)	
Examples: Livestock, poultry, farm-raised fish No YesSheep, Cows, Goats \$9,000.00 48. Crops-either growing or harvested No Yes. Give specific information					portion you own? Do not deduct secured
\$9,000.00 48. Crops-either growing or harvested No	47.	Exampl	······		
No Yes. Give specific information		ш	Sheep, Cows, Goats		\$9,000.00
Yes. Give specific information	48.	Crops-	either growing or harvested		
No		Yes	· •]
Yes 50. Farm and fishing supplies, chemicals, and feed No	49.	Farm a	nd fishing equipment, implements, machinery, fixtures	, and tools of trade	
No			s]
Yes Stock Yes Stock Yes Stock Yes. Give specific information	50.	Farm a	nd fishing supplies, chemicals, and feed		
No Yes. Give specific information			S]
Yes. Give specific information	51.	Any far	m- and commercial fishing-related property you did no	ot already list	
Part 7: Describe All Property You Own or Have an Interest in That You Did Not List Above 53. Do you have other property of any kind you did not already list? Examples: Season tickets, country club membership No Yes. Give specific information.		Yes]
53. Do you have other property of any kind you did not already list? Examples: Season tickets, country club membership ☑ No ☐ Yes. Give specific information.	52.		· · · · · · · · · · · · · · · · · · ·	_	\$9,000.00
Examples: Season tickets, country club membership No Yes. Give specific information.	Pa	art 7:	Describe All Property You Own or Have an I	nterest in That You Did Not List Above	
Yes. Give specific information.	53.	-		est?	
54. Add the dollar value of all of your entries from Part 7. Write that number here		<u>-</u>	s. Give specific information.		
	54.	Add the	e dollar value of all of your entries from Part 7. Write the	nat number here	\$0.00

Case 21-31704-sgj7 Doc 1 Filed 09/24/21 Entered 09/24/21 10:12:48 Desc Main Document Page 16 of 67

Debtor 1 Debtor 2	Christopher Grider Crystal Grider	Case nu	Case number (if known)				
Part 8	List the Totals of Each Part of this Form						
55. Part	1: Total real estate, line 2			—	\$0.00		
56. Part	2: Total vehicles, line 5	\$27,000.00					
57. Part	3: Total personal and household items, line 15	\$4,780.00					
58. Part	4: Total financial assets, line 36	\$50,358.00					
59. Part	5: Total business-related property, line 45	\$11,285.00					
60. Part	6: Total farm- and fishing-related property, line 52	\$9,000.00					
61. Part	7: Total other property not listed, line 54	+\$0.00					
62. Tota	al personal property. Add lines 56 through 61	\$102,423.00	Copy personal property total	+	\$102,423.00		
63. Tota	al of all property on Schedule A/B. Add line 55 + line 62.				\$102,423.00		

Case 21-31704-sgj7 Doc 1 Filed 09/24/21 Entered 09/24/21 10:12:48 Desc Main Document Page 17 of 67

	otor 1	Christopher Grider		
Del	otor 2	Crystal Grider	Case number (if known)	
6.	House	hold goods and furnishings (details):		
	Dishw	vare, Flatware, Glassware, etc.		\$60.00
	Dining	g Room Furniture		\$200.00
	Den F	urniture		\$400.00
	Bedro	oom Furniture		\$200.00
	Piano			\$500.00
	Patio	Furniture		\$40.00
	House	ehold Tools		\$500.00
7.	Electro	onics (details):		
	Telev	ision (2)		\$80.00
	Stere	0		\$100.00
	Perso	onal Computers (4)		\$600.00

Case 21-31704-sgj7 Doc 1 Filed 09/24/21 Entered 09/24/21 10:12:48 Desc Main Document Page 18 of 67

Fill in this information to identify your case:						
Debtor 1	Christopher First Name	Middle Name	Grider Last Name			
Debtor 2 (Spouse, if filing)	Crystal First Name	Middle Name	Grider Last Name			
United States Bar		the: NORTHERN D	ISTRICT OF TEXAS			
Case number (if known)						
Official Form 106C						
Schedule C: The Property You Claim as Exempt						

04/19

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. Using the property you listed on Schedule A/B: Property (Official Form 106A/B) as your source, list the property that you claim as exempt. If more space is needed, fill out and attach to this page as many copies of Part 2: Additional Page as necessary. On the top of any additional pages, write your name and case number (if known).

For each item of property you claim as exempt, you must specify the amount of the exemption you claim. One way of doing so is to state a specific dollar amount as exempt. Alternatively, you may claim the full fair market value of the property being exempted up to the amount of any applicable statutory limit. Some exemptions--such as those for health aids, rights to receive certain benefits, and tax-exempt retirement funds--may be unlimited in dollar amount. However, if you claim an exemption of 100% of fair market value under a law that limits the exemption to a particular dollar amount and the value of the

pro	perty is determined to exceed that amount, y	our exemption would	be li	mited to the applicabl	e statutory amount.
P	art 1: Identify the Property You C	laim as Exempt			
1.	Which set of exemptions are you claiming? ☐ You are claiming state and federal nonba ☐ You are claiming federal exemptions. 11	inkruptcy exemptions.		if your spouse is filing S.C. § 522(b)(3)	with you.
2.	For any property you list on Schedule A/B t	that you claim as exen	npt, f	ill in the information I	below.
	ef description of the property and line on hedule A/B that lists this property	Current value of the portion you own		ount of the mption you claim	Specific laws that allow exemption
		Copy the value from Schedule A/B		eck only one box for h exemption	
20 (1s	ef description: 16 Dodge Ram (approx. 125,000 miles) st exemption claimed for this asset) e from Schedule A/B:3.1	\$20,000.00		\$4,000.00 100% of fair market value, up to any applicable statutory limit	11 U.S.C. § 522(d)(2)
20 (2r	ef description: 16 Dodge Ram (approx. 125,000 miles) nd exemption claimed for this asset) e from Schedule A/B:3.1	\$20,000.00		\$364.00 100% of fair market value, up to any applicable statutory limit	11 U.S.C. § 522(d)(5)
20 mi (1s	ef description: 11 Mercedes ML 350 (approx. 95,000 les) st exemption claimed for this asset) e from Schedule A/B:3.2	\$6,000.00		\$4,000.00 100% of fair market value, up to any applicable statutory limit	11 U.S.C. § 522(d)(2)
3.	Are you claiming a homestead exemption of (Subject to adjustment on 4/01/22 and every 3 No Yes. Did you acquire the property covered No Yes	years after that for cas	es fil		,

Case 21-31704-sgj7 Doc 1 Filed 09/24/21 Entered 09/24/21 10:12:48 Desc Main Document Page 19 of 67

	Crystal Grider	Case number (if known)						
Part 2:	Additional Page							
-	tion of the property and line on 3 that lists this property	Current value of the portion you own		ount of the mption you claim	Specific laws that allow exemption			
		Copy the value from Schedule A/B		eck only one box for h exemption				
miles) (2nd exemp	des ML 350 (approx. 95,000 ation claimed for this asset)	\$6,000.00		\$2,000.00 100% of fair market value, up to any applicable statutory limit	11 U.S.C. § 522(d)(5)			
	ion: se 4 Wheeler nedule A/B:4.1	\$500.00		\$500.00 100% of fair market value, up to any applicable statutory limit	11 U.S.C. § 522(d)(5)			
	on: se 4 Wheeler nedule A/B:4.2	\$500.00		\$500.00 100% of fair market value, up to any applicable statutory limit	11 U.S.C. § 522(d)(5)			
	on: Flatware, Glassware, etc. nedule A/B: 6	\$60.00		\$60.00 100% of fair market value, up to any applicable statutory limit	11 U.S.C. § 522(d)(3)			
	on: m Furniture nedule A/B: 6	\$200.00		\$200.00 100% of fair market value, up to any applicable statutory limit	11 U.S.C. § 522(d)(3)			
Brief descripti Den Furnitu Line from <i>Sch</i>	ire	\$400.00		\$400.00 100% of fair market value, up to any applicable statutory limit	11 U.S.C. § 522(d)(3)			
Brief descripti Bedroom Fi Line from <i>Sch</i>		\$200.00		\$200.00 100% of fair market value, up to any applicable statutory limit	11 U.S.C. § 522(d)(3)			
Brief descripti Piano Line from <i>Sch</i>	on: nedule A/B: 6	\$500.00		\$500.00 100% of fair market value, up to any applicable statutory limit	11 U.S.C. § 522(d)(3)			
Brief descripti Patio Furnit Line from <i>Sch</i>	ure	\$40.00		\$40.00 100% of fair market value, up to any applicable statutory limit	11 U.S.C. § 522(d)(3)			

Case 21-31704-sgj7 Doc 1 Filed 09/24/21 Entered 09/24/21 10:12:48 Desc Main Document Page 20 of 67

Debtor 2 Crystal Grider	Case number (if known)						
Part 2: Additional Page							
Brief description of the property and line on Schedule A/B that lists this property	Current value of the portion you own		ount of the mption you claim	Specific laws that allow exemption			
	Copy the value from Schedule A/B		eck only one box for h exemption				
Brief description: Household Tools Line from Schedule A/B:6	\$500.00		\$500.00 100% of fair market value, up to any applicable statutory limit	11 U.S.C. § 522(d)(3)			
Brief description: Television (2) Line from <i>Schedule A/B</i> : 7	\$80.00		\$80.00 100% of fair market value, up to any applicable statutory limit	11 U.S.C. § 522(d)(3)			
Brief description: Stereo Line from Schedule A/B:7	\$100.00		\$100.00 100% of fair market value, up to any applicable statutory limit	11 U.S.C. § 522(d)(3)			
Brief description: Personal Computers (4) Line from Schedule A/B:	\$600.00		\$600.00 100% of fair market value, up to any applicable statutory limit	11 U.S.C. § 522(d)(3)			
Brief description: Books, Framed Pictures Line from Schedule A/B:8	\$300.00		\$300.00 100% of fair market value, up to any applicable statutory limit	11 U.S.C. § 522(d)(3)			
Brief description: Miscellaneous exercise and sports equipment Line from Schedule A/B: 9	\$500.00		\$500.00 100% of fair market value, up to any applicable statutory limit	11 U.S.C. § 522(d)(3)			
Brief description: Men's, Women's and children's clothing Line from Schedule A/B:11	\$300.00		\$300.00 100% of fair market value, up to any applicable statutory limit	11 U.S.C. § 522(d)(3)			
Brief description: Wedding Rings Line from Schedule A/B:12	\$1,000.00		\$1,000.00 100% of fair market value, up to any applicable statutory limit	11 U.S.C. § 522(d)(4)			
Brief description: 1% Interest in Kissing Tree Vineyards, LLC Line from Schedule A/B:19	\$0.00		\$0.00 100% of fair market value, up to any applicable statutory limit	11 U.S.C. § 522(d)(5)			

Case 21-31704-sgj7 Doc 1 Filed 09/24/21 Entered 09/24/21 10:12:48 Desc Main Document Page 21 of 67

Debtor 1 Debtor 2	Christopher Grider Crystal Grider	Case number (if known)						
Part 2:	Additional Page							
	iption of the property and line on //B that lists this property	Current value of the portion you own	Amount of the exemption you claim	Specific laws that allow exemption				
		Copy the value from Schedule A/B	Check only one box for each exemption					
	otion: It account - TRS Chedule A/B:21	\$29,567.00	\$29,567.00 100% of fair market value, up to any applicable statutory limit	11 U.S.C. § 522(b)(3)(C)				
	otion: It account - TRS Chedule A/B: 21	\$20,791.00	\$20,791.00 100% of fair market value, up to any applicable statutory limit	11 U.S.C. § 522(b)(3)(C)				
	otion: niture, Printers, iPad chedule A/B:39	\$1,285.00	\$1,285.00 100% of fair market value, up to any applicable statutory limit	11 U.S.C. § 522(d)(6)				
approxima	otion: raw wine in barrels - ately 20 bbls chedule A/B:41	\$10,000.00	\$10,000.00 100% of fair market value, up to any applicable statutory limit	11 U.S.C. § 522(d)(5)				
Brief descrip Sheep, Co o Line from <i>So</i>		\$9,000.00	\$0.00 100% of fair market value, up to any applicable statutory limit	11 U.S.C. § 522(d)(5)				

Case 21-31704-sgj7 Doc 1 Filed 09/24/21 Entered 09/24/21 10:12:48 Desc Main Document Page 22 of 67

Fill in this inf	ormation to ident	tity your case:						
Debtor 1	Christopher First Name	Middle Name	Grider Last Name					
	_	Middle Name						
Debtor 2 (Spouse, if filing)	Crystal First Name	Middle Name	Grider Last Name					
(Opedee, ii iiiiig)	ot rtaine	au	240(1141110					
United States Bar	nkruptcy Court for the:	NORTHERN D	ISTRICT OF TEXAS					
Case number					☐ Check if this is	s an		
(if known)					amended filing			
Official Form	106D							
Schedule D:	Creditors Wh	o Have Cla	ims Secured b	y Property		12/15		
correct informatio On the top of any 1. Do any credit □ No. Che □ Yes. Fill Part 1: Lis 2. List all secure claim, list the creditor has a much as poss	No. Check this box and submit this form to the court with your other schedules. You have nothing else to report on this form. Yes. Fill in all of the information below. Part 1: List All Secured Claims							
2.1		Describe the secures the	property that	\$4,008.99	\$0.00	\$4,008.99		
McLennan Coun	nty Tax Office	Secures the d						
Creditor's name PO Box 406		— Busilless A	3313					
Number Street								
		— As of the dat	a vau fila tha alaim ia	. Check all that apply				
		Continger	e you file, the claim is	. Спеск ан тат арргу.				
Waco	TX 76703	☐ Unliquida						
City	State ZIP Code	Disputed						
Who owes the deb	ot? Check one.	Nature of lie	n. Check all that apply					
Debtor 1 only			ment you made (such a		car loan)			
Debtor 2 only Statutory lien (such as tax lien, mechanic's lien)								
Debtor 1 and D	the debtors and anoth	Judgmen	t lien from a lawsuit					
_		Other (inc	cluding a right to offset)					
Check if this of to a community		Taxes						
Date debt was inc	urred	Last 4 digits	of account number					

Add the dollar value of your entries in Column A on this page. Write that number here:

\$4,008.99

Case 21-31704-sgj7 Doc 1 Filed 09/24/21 Entered 09/24/21 10:12:48 Desc Main Document Page 23 of 67

Debtor 1 Christopher Grider Debtor 2 Crystal Grider		_ Case number (if	known)	
Part 1: Additional Page After listing any entries on sequentially from the previous		Column A Amount of claim Do not deduct the value of collateral	Column B Value of collateral that supports this claim	Column C Unsecured portion If any
McLennan County Tax Office Creditor's name PO Box 406 Number Street	Describe the property that secures the claim: Business Assets	\$466.76	\$0.00	\$466.76
Waco TX 76703 City State ZIP Code Who owes the debt? Check one. □ Debtor 1 only □ Debtor 2 only ☑ Debtor 1 and Debtor 2 only □ At least one of the debtors and another ☑ Check if this claim relates to a community debt	As of the date you file, the claim is: Contingent Unliquidated Disputed Nature of lien. Check all that apply. An agreement you made (such as Statutory lien (such as tax lien, med Judgment lien from a lawsuit Other (including a right to offset) Taxes	mortgage or secured	car loan)	
Date debt was incurred 2.3 TD Auto Finance, LLC Creditor's name PO Box 16035 Number Street	Last 4 digits of account number Describe the property that secures the claim: 2016 Dodge Ram (approx. 125,000 miles)	\$15,636.00	\$20,000.00	
Lewiston ME 04243 City State ZIP Code Who owes the debt? Check one. Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only At least one of the debtors and another Check if this claim relates to a community debt	As of the date you file, the claim is: Contingent Unliquidated Disputed Nature of lien. Check all that apply. An agreement you made (such as Statutory lien (such as tax lien, medulum Judgment lien from a lawsuit) Other (including a right to offset) Automobile Loan	mortgage or secured	car loan)	

Add the dollar value of your entries in Column A on this page. Write that number here:

\$16,102.76

Case 21-31704-sgj7 Doc 1 Filed 09/24/21 Entered 09/24/21 10:12:48 Desc Main Document Page 24 of 67

Debtor 1 Debtor 2	Christopher Crystal Gric			_ Case number (if	known)	
Additional Page Part 1: After listing any entries on sequentially from the previous		any entries on t		Column A Amount of claim Do not deduct the value of collateral	Column B Value of collateral that supports this claim	Column C Unsecured portion If any
Creditor's nam	ne	nk of McGrego	Describe the property that secures the claim: Mother-in-Law's assets	\$336,719.64	\$0.00	\$336,719.64
McGregor City Who owes to Debtor 2 Debtor 2 Debtor 3 Debtor 4 Check is to a cor Date debt w	TX State the debt? Che 1 only 2 only 1 and Debtor 2	only tors and another	As of the date you file, the claim is: Contingent Unliquidated Disputed Nature of lien. Check all that apply. An agreement you made (such as Statutory lien (such as tax lien, me Judgment lien from a lawsuit Other (including a right to offset) Business Loan Last 4 digits of account number Describe the property that	mortgage or secured	car loan)	
Creditor's nam 27000 W. I	ne	nk of McGrego	secures the claim: Livestock	\$107,992.98	\$9,000.00	\$98,992.98
Debtor 2 Debtor 2 Debtor 3 Debtor 3 Debtor 4 Debtor 4 Check i	State the debt? Che 1 only 2 only 1 and Debtor 2	only tors and another	As of the date you file, the claim is: Contingent Unliquidated Disputed Nature of lien. Check all that apply. An agreement you made (such as Statutory lien (such as tax lien, me Judgment lien from a lawsuit Other (including a right to offset) Business Loan	mortgage or secured	car loan)	
Date debt w	vas incurred		Last 4 digits of account number			

Add the dollar value of your entries in Column A on this page. Write that number here:

\$444,712.62

If this is the last page of your form, add the dollar value totals from all pages. Write that number here:

\$464,824.37

Case 21-31704-sgj7 Doc 1 Filed 09/24/21 Entered 09/24/21 10:12:48 Desc Main Document Page 25 of 67

				ì		
Fill in this inf	ormation to ide	ntify your ca	ase:			
Debtor 1	Christopher		Grider			
	First Name	Middle Name	Last Name			
Debtor 2	Crystal		Grider			
(Spouse, if filing)		Middle Name	Last Name			
United States Bar	nkruptcy Court for th	e: NORTHER	N DISTRICT OF TEXAS			
Case number					Check if this is	an
(if known)				│	amended filing	
Official Farms	4005/5			I	· ·	
Official Form						
Schedule E/	F: Creditors	Who Have	Unsecured Claims			12/15
on Schedule A/B: Do not include any If more space is n to this page. On t	Property (Official F y creditors with par eeded, copy the Pa he top of any addit	orm 106A/B) a tially secured rt you need, fil onal pages, w	acts or unexpired leases that coul and on Schedule G: Executory Couclaims that are listed in Schedule II it out, number the entries in the rite your name and case number (ntracts and Unexpired D: Creditors Who Ho boxes on the left. Att	l Leases (Offici Id Claims Secu	al Form 106G). red by Property.
Part 1: Lis	t All of Your PR	IORITY Uns	ecured Claims			
1. Do any credit	ors have priority u	nsecured clain	ns against you?			
✓ No. Go t	o Part 2.					
☐ Yes.						
claim. For each show both price space is claim, list the	ch claim listed, ident prity and nonpriority needed for priority other creditors in Pa	ify what type of amounts. As m unsecured clain rt 3.	creditor has more than one priority u claim it is. If a claim has both priori such as possible, list the claims in al ns, fill out the Continuation Page of	ty and nonpriority amor phabetical order accord Part 1. If more than on	unts, list that cla	nim here and tor's name. If
(For an explar	nation of each type of	t claim, see the	instructions for this form in the inst	Total claim	Priority	Nonpriority
				Total Clailli	amount	amount
2.1						
Priority Creditor's Nam	e		Last 4 digits of account number			
			When was the debt incurred?			
Number Street						
-			As of the date you file, the claim	is: Check all that apply	/ .	
			Contingent Unliquidated			
0%	01-1- 70	20-1-	Disputed			
City Who incurred the		Code	Time of DDIODITY improving all	:		
Debtor 1 only	debt? Check one	•	Type of PRIORITY unsecured cla Domestic support obligations	ım:		
Debtor 2 only			Taxes and certain other debts	vou owe the aovernme	nt	
Debtor 1 and D	•		Claims for death or personal in		-	
<u> </u>	the debtors and and		intoxicated			
_	laim is for a comm	unity debt	Other. Specify			
Is the claim subject	ct to offset?					
□ No □ Yes						

Case 21-31704-sgj7 Doc 1 Filed 09/24/21 Entered 09/24/21 10:12:48 Desc Main Document Page 26 of 67

Debtor 1 Debtor 2	Christopher Grider Crystal Grider	Case number (if known)
Part 2:	List All of Your NONPRIORIT	Y Unsecured Claims
☐ No You 4. List all If a cree type of	of your nonpriority unsecured claims ditor has more than one nonpriority unsec claim it is. Do not list claims already incl	claims against you? Submit this form to the court with your other schedules. in the alphabetical order of the creditor who holds each claim. cured claim, list the creditor separately for each claim. For each claim listed, identify what uded in Part 1. If more than one creditor holds a particular claim, list the other creditors in insecured claims, fill out the Continuation Page of Part 2.
Nonpriority Cr		\$1,496.00 Last 4 digits of account number When was the debt incurred? As of the date you file, the claim is: Check all that apply. Contingent Unliquidated Disputed
Debtor Debtor Debtor Debtor Debtor At least Check is the claim No Yes	•	Type of NONPRIORITY unsecured claim: □ Student loans □ Obligations arising out of a separation agreement or divorce that you did not report as priority claims □ Debts to pension or profit-sharing plans, and other similar debts □ Other. Specify ■ Business Vendor
Lively City Who incurr Debtor Debtor At least	VA 22507 State ZIP Code ed the debt? Check one. 1 only 2 only 1 and Debtor 2 only one of the debtors and another	Last 4 digits of account number When was the debt incurred? As of the date you file, the claim is: Check all that apply. Contingent Unliquidated Disputed Type of NONPRIORITY unsecured claim: Student loans Obligations arising out of a separation agreement or divorce that you did not report as priority claims Debts to pension or profit-sharing plans, and other similar debts Other. Specify
	if this claim is for a community debt subject to offset?	Business Vendor

Case 21-31704-sgj7 Doc 1 Filed 09/24/21 Entered 09/24/21 10:12:48 Desc Main Document Page 27 of 67

Debtor 1 Christopher Grider Debtor 2 Crystal Grider	Case number (if known)	
Part 2: Your NONPRIORITY Unsecu	red Claims Continuation Page	
After listing any entries on this page, number the previous page.	m sequentially from the	Total claim
4.3		\$1,000.00
Atmos Energy	Last 4 digits of account number	
Nonpriority Creditor's Name PO Box 740353	When was the debt incurred?	
Number Street	As of the date you file, the claim is: Check all that apply. Contingent Unliquidated	
Cincinnati OH 45274	─ □ Disputed	
City State ZIP Code Who incurred the debt? Check one. Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only At least one of the debtors and another Check if this claim is for a community debt Is the claim subject to offset? No	Type of NONPRIORITY unsecured claim: Student loans Obligations arising out of a separation agreement or divorce that you did not report as priority claims Debts to pension or profit-sharing plans, and other similar debts Other. Specify Utilities	
Yes		
4.4		\$1,924.00
Bank of America	Last 4 digits of account number	
Nonpriority Creditor's Name PO Box 982238	When was the debt incurred?	
Number Street	As of the date you file, the claim is: Check all that apply. ☐ Contingent ☐ Unliquidated	
	— ☐ Disputed	
El Paso TX 79998 City State ZIP Code	Time of NONDDIODITY improving a laim.	
Who incurred the debt? Check one. Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only At least one of the debtors and another Check if this claim is for a community debt Is the claim subject to offset? No Yes	Type of NONPRIORITY unsecured claim: Student loans Obligations arising out of a separation agreement or divorce that you did not report as priority claims Debts to pension or profit-sharing plans, and other similar debts Other. Specify Credit Card	
4.5		\$441.80
Baylor Scott & White Nonpriority Creditor's Name	Last 4 digits of account number	
111 West Jackson Blvd, Ste 400 Number Street	When was the debt incurred? As of the date you file, the claim is: Check all that apply. Contingent Unliquidated	
Chicago IL 60604	Disputed	
City State ZIP Code Who incurred the debt? Check one. Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only At least one of the debtors and another Check if this claim is for a community debt Is the claim subject to offset?	Type of NONPRIORITY unsecured claim: Student loans Obligations arising out of a separation agreement or divorce that you did not report as priority claims Debts to pension or profit-sharing plans, and other similar debts Other. Specify Medical	
☑ No □ Yes		

Case 21-31704-sgj7 Doc 1 Filed 09/24/21 Entered 09/24/21 10:12:48 Desc Main Document Page 28 of 67

Debtor 1 Christopher Grider Debtor 2 Crystal Grider	Case number (if known)	
Part 2: Your NONPRIORITY Unsecu	red Claims Continuation Page	
After listing any entries on this page, number the previous page.	em sequentially from the	Total claim
4.6		\$1,602.00
Baylor Scott & White	Last 4 digits of account number	
Nonpriority Creditor's Name 111 West Jackson Blvd, Ste 400	When was the debt incurred?	
Number Street	As of the date you file, the claim is: Check all that apply.	
-		
Chicago IL 60604	Disputed	
City State ZIP Code	Type of NONPRIORITY unsecured claim:	
Who incurred the debt? Check one. Debtor 1 only	Student loans	
Debtor 2 only	 Obligations arising out of a separation agreement or divorce that you did not report as priority claims 	
Debtor 1 and Debtor 2 only	Debts to pension or profit-sharing plans, and other similar debts	
At least one of the debtors and another	☑ Other. Specify	
Check if this claim is for a community debt	Medical	
Is the claim subject to offset? ✓ No		
Yes		
4.7		#040.00
BMI	Last 4 digits of account number	\$812.00
Nonpriority Creditor's Name	When was the debt incurred?	
Nationwide Credit Inc Number Street	As of the date you file, the claim is: Check all that apply.	
PO Box 15130	Contingent	
	Unliquidated Disputed	
Wilmington DE 19850		
City State ZIP Code Who incurred the debt? Check one.	Type of NONPRIORITY unsecured claim:	
Debtor 1 only	☐ Student loans ☐ Obligations arising out of a separation agreement or divorce	
Debtor 2 only	that you did not report as priority claims	
Debtor 1 and Debtor 2 only At least one of the debtors and another	Debts to pension or profit-sharing plans, and other similar debts	
☐ Check if this claim is for a community debt	✓ Other. Specify Collections	
Is the claim subject to offset?	001100110110	
☑ No		
Yes		
4.8		\$49.00
Central Texas Mobility Authority	Last 4 digits of account number	
Nonpriority Creditor's Name Penn Credit Corporation	When was the debt incurred?	
Number Street	As of the date you file, the claim is: Check all that apply.	
2800 Commerce Dr		
PO Box 69703	— ☐ Disputed	
Harrisburg PA 17106 City State ZIP Code	Type of NONPRIORITY unsecured claim:	
Who incurred the debt? Check one.	Student loans	
Debtor 1 only Debtor 2 only	Obligations arising out of a separation agreement or divorce	
Debtor 2 only Debtor 1 and Debtor 2 only	that you did not report as priority claims	
At least one of the debtors and another	☐ Debts to pension or profit-sharing plans, and other similar debts ☐ Other. Specify	
☐ Check if this claim is for a community debt	Tolls	
Is the claim subject to offset?		
☑ No ☐ Yes		

Case 21-31704-sgj7 Doc 1 Filed 09/24/21 Entered 09/24/21 10:12:48 Desc Main Document Page 29 of 67

Debtor 1 Christopher Grider Debtor 2 Crystal Grider	Case number (if known)	
Part 2: Your NONPRIORITY Unsecu	red Claims Continuation Page	
After listing any entries on this page, number the previous page.	em sequentially from the	Total claim
4.9		\$5,684.00
Citi Cards CBNA	Last 4 digits of account number	
Nonpriority Creditor's Name 5800 South Corporate Place	When was the debt incurred?	
Number Street	As of the date you file, the claim is: Check all that apply.	
	Contingent Unliquidated	
	— ☐ Disputed	
Sioux Falls SD 57108 City State ZIP Code	Time of NONDRIGHTY improving a laim.	
Who incurred the debt? Check one.	Type of NONPRIORITY unsecured claim: Student loans	
Debtor 1 only	Obligations arising out of a separation agreement or divorce	
Debtor 2 only Debtor 1 and Debtor 2 only	that you did not report as priority claims	
At least one of the debtors and another	☐ Debts to pension or profit-sharing plans, and other similar debts ☐ Other. Specify	
☐ Check if this claim is for a community debt	Credit Card	
Is the claim subject to offset?		
No No		
Yes		
4.10		\$5,368.00
Constellation Energy	Last 4 digits of account number	
Nonpriority Creditor's Name PO Box 5471	When was the debt incurred?	
Number Street	As of the date you file, the claim is: Check all that apply.	
	Contingent	
	☐ Unliquidated ☐ Disputed	
Carol Stream IL 60197		
City State ZIP Code Who incurred the debt? Check one.	Type of NONPRIORITY unsecured claim:	
Debtor 1 only	☐ Student loans ☐ Obligations arising out of a separation agreement or divorce	
Debtor 2 only	that you did not report as priority claims	
Debtor 1 and Debtor 2 only At least one of the debtors and another	☐ Debts to pension or profit-sharing plans, and other similar debts	
	✓ Other. Specify	
S the claim subject to offset?	Utilities	
✓ No		
Yes		
4.11		\$86,755.00
Dept of Education/Nelnet	Last 4 digits of account number	φου,/ 33.00
Nonpriority Creditor's Name	When was the debt incurred?	
PO Box 82561 Number Street	As of the date you file, the claim is: Check all that apply.	
	_ ☐ Contingent	
	Unliquidated	
Lincoln NE 68501	Disputed	
City State ZIP Code Who incurred the debt? Check one.	Type of NONPRIORITY unsecured claim:	
Debtor 1 only	Student loans	
Debtor 2 only	 Obligations arising out of a separation agreement or divorce that you did not report as priority claims 	
Debtor 1 and Debtor 2 only	Debts to pension or profit-sharing plans, and other similar debts	
At least one of the debtors and another	Other. Specify	
Check if this claim is for a community debt		
Is the claim subject to offset? ✓ No		
Yes		

Case 21-31704-sgj7 Doc 1 Filed 09/24/21 Entered 09/24/21 10:12:48 Desc Main Document Page 30 of 67

Debtor 1 Christopher Grider Debtor 2 Crystal Grider	Case number (if known)	
Part 2: Your NONPRIORITY Unsecu	red Claims Continuation Page	
After listing any entries on this page, number the previous page.	m sequentially from the	Total claim
4.12		\$41,082.00
Dept of Education/Nelnet	Last 4 digits of account number	
Nonpriority Creditor's Name PO Box 82561	When was the debt incurred?	
Number Street	As of the date you file, the claim is: Check all that apply.	
	_ Contingent	
	☐ Unliquidated ☐ ☐ Disputed	
Lincoln NE 68501		
City State ZIP Code Who incurred the debt? Check one.	Type of NONPRIORITY unsecured claim:	
Debtor 1 only		
Debtor 2 only	that you did not report as priority claims	
Debtor 1 and Debtor 2 only At least one of the debtors and another	Debts to pension or profit-sharing plans, and other similar debts	
	Other. Specify	
Check if this claim is for a community debt ls the claim subject to offset?		
No		
Yes		
4.13		\$6,754.00
Discover Card Nonpriority Creditor's Name	Last 4 digits of account number	
PO Box 29013	When was the debt incurred?	
Number Street	As of the date you file, the claim is: Check all that apply.	
	Contingent Unliquidated	
	Disputed	
Phoenix AZ 85038 City State ZIP Code	Time of NONDDIODITY impossived eleimi	
Who incurred the debt? Check one.	Type of NONPRIORITY unsecured claim: Student loans	
Debtor 1 only	☐ Obligations arising out of a separation agreement or divorce	
Debtor 2 only Debtor 1 and Debtor 2 only	that you did not report as priority claims	
Debtor 1 and Debtor 2 only At least one of the debtors and another	Debts to pension or profit-sharing plans, and other similar debts	
☐ Check if this claim is for a community debt	✓ Other. Specify Credit Card	
Is the claim subject to offset?	Ordan Gara	
☑ No		
Yes		
4.14		¢E 704 00
	Last 4 digits of account number	\$5,704.00
Nonpriority Creditor's Name	Last 4 digits of account number When was the debt incurred?	
PO Box 15316		
Number Street	As of the date you file, the claim is: Check all that apply. — Contingent	
	Unliquidated	
Wilmington DE 19850	Disputed	
City State ZIP Code	Type of NONPRIORITY unsecured claim:	
Who incurred the debt? Check one.	Student loans	
Debtor 1 only Debtor 2 only	Obligations arising out of a separation agreement or divorce	
Debtor 2 only Debtor 1 and Debtor 2 only	that you did not report as priority claims	
At least one of the debtors and another	☐ Debts to pension or profit-sharing plans, and other similar debts ☐ Other. Specify	
Check if this claim is for a community debt	Credit Card	
Is the claim subject to offset?		
☑ No □ Yes		

Case 21-31704-sgj7 Doc 1 Filed 09/24/21 Entered 09/24/21 10:12:48 Desc Main Document Page 31 of 67

Debtor 1 Christopher Grider Debtor 2 Crystal Grider	Case number (if known)	
Part 2: Your NONPRIORITY Unsecu	red Claims Continuation Page	
After listing any entries on this page, number the previous page.	em sequentially from the	Total claim
4.15		\$2,023.00
Fed Loan Servicing	Last 4 digits of account number	· · · · · · · · · · · · · · · · · · ·
Nonpriority Creditor's Name PO Box 60610	When was the debt incurred?	
Number Street	As of the date you file, the claim is: Check all that apply.	
	☐ Contingent ☐ Unliquidated ☐ Unliquidated ☐ Contingent	
	— ☐ Disputed	
Harrisburg PA 17106 City State ZIP Code	— ,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	
Who incurred the debt? Check one.	Type of NONPRIORITY unsecured claim:	
Debtor 1 only		
Debtor 2 only	that you did not report as priority claims	
Debtor 1 and Debtor 2 only At least one of the debtors and another	Debts to pension or profit-sharing plans, and other similar debts	
☐ Check if this claim is for a community debt	Other. Specify	
Is the claim subject to offset?		
☑ No		
Yes		
4.16		¢2.440.00
Fed Loan Servicing	Last 4 digits of account number	\$2,149.00
Nonpriority Creditor's Name	When was the debt incurred?	
PO Box 60610 Number Street	As of the date you file, the claim is: Check all that apply.	
Number Sueet	_ ☐ Contingent	
	Unliquidated	
Harrisburg PA 17106	Disputed	
City State ZIP Code	Type of NONPRIORITY unsecured claim:	
Who incurred the debt? Check one.		
Debtor 1 only Debtor 2 only	Obligations arising out of a separation agreement or divorce	
Debtor 1 and Debtor 2 only	that you did not report as priority claims Debts to pension or profit-sharing plans, and other similar debts	
At least one of the debtors and another	Other. Specify	
☑ Check if this claim is for a community debt		
Is the claim subject to offset?		
☑ No □ Yes		
4.17		\$1,148.00
Fed Loan Servicing	Last 4 digits of account number	
Nonpriority Creditor's Name PO Box 60610	When was the debt incurred?	
Number Street	As of the date you file, the claim is: Check all that apply.	
	□ Contingent □ Unliquidated	
	☐ Disputed	
Harrisburg PA 17106 City State ZIP Code		
Who incurred the debt? Check one.	Type of NONPRIORITY unsecured claim:	
Debtor 1 only		
Debtor 2 only	that you did not report as priority claims	
✓ Debtor 1 and Debtor 2 only✓ At least one of the debtors and another	Debts to pension or profit-sharing plans, and other similar debts	
Check if this claim is for a community debt	Other. Specify	
Is the claim subject to offset?		
✓ No		
T Yes		

Case 21-31704-sgj7 Doc 1 Filed 09/24/21 Entered 09/24/21 10:12:48 Desc Main Document Page 32 of 67

Debtor 1 Christopher Grider Debtor 2 Crystal Grider	Case number (if known)	
Part 2: Your NONPRIORITY Unsecu	red Claims Continuation Page	
After listing any entries on this page, number the previous page.	m sequentially from the	Total claim
4.18		\$975.00
Fed Loan Servicing	Last 4 digits of account number	· ·
Nonpriority Creditor's Name PO Box 60610	When was the debt incurred?	
Number Street	As of the date you file, the claim is: Check all that apply. Contingent Unliquidated Disputed	
Harrisburg PA 17106		
City State ZIP Code Who incurred the debt? Check one. Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only At least one of the debtors and another Check if this claim is for a community debt Is the claim subject to offset? No	Type of NONPRIORITY unsecured claim: Student loans Obligations arising out of a separation agreement or divorce that you did not report as priority claims Debts to pension or profit-sharing plans, and other similar debts Other. Specify	
Yes		
4.19		\$447.00
Hillcrest Physicians Services	Last 4 digits of account number	
Nonpriority Creditor's Name PO Box 1259, Dept 143396	When was the debt incurred?	
Number Street	As of the date you file, the claim is: Check all that apply.	
	☐ Contingent	
	☐ Unliquidated ☐ Disputed	
Oaks PA 19456		
City State ZIP Code Who incurred the debt? Check one. Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only At least one of the debtors and another Check if this claim is for a community debt Is the claim subject to offset?	Type of NONPRIORITY unsecured claim: Student loans Obligations arising out of a separation agreement or divorce that you did not report as priority claims Debts to pension or profit-sharing plans, and other similar debts Other. Specify Medical	
☑ No		
Yes		
4.20		\$7,218.00
JP Morgan Chase Card Services	Last 4 digits of account number	
Nonpriority Creditor's Name PO Box 15369	When was the debt incurred?	
Number Street	As of the date you file, the claim is: Check all that apply. Contingent	
	☐ Unliquidated ☐ Disputed	
Wilmington DE 19850		
City State ZIP Code Who incurred the debt? Check one. Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only At least one of the debtors and another Check if this claim is for a community debt Is the claim subject to offset?	Type of NONPRIORITY unsecured claim: Student loans Obligations arising out of a separation agreement or divorce that you did not report as priority claims Debts to pension or profit-sharing plans, and other similar debts Other. Specify Credit Card	
☑ No □ Yes		

Case 21-31704-sgj7 Doc 1 Filed 09/24/21 Entered 09/24/21 10:12:48 Desc Main Document Page 33 of 67

Debtor 1 Christopher Grider Debtor 2 Crystal Grider	Case number (if known)	
Part 2: Your NONPRIORITY Unsecu	red Claims Continuation Page	
After listing any entries on this page, number the previous page.	em sequentially from the	Total claim
4.21		\$504.00
Laboratory Physicians Assoc	Last 4 digits of account number	
Nonpriority Creditor's Name 2809 Regal Road #107	When was the debt incurred?	
Number Street	As of the date you file, the claim is: Check all that apply.	
	☐ Contingent ☐ Unliquidated ☐ Unliquidated ☐ Contingent	
	— ☐ Disputed	
Plano TX 75075 City State ZIP Code	— , ,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	
Who incurred the debt? Check one.	Type of NONPRIORITY unsecured claim: Student loans	
Debtor 1 only	☐ Obligations arising out of a separation agreement or divorce	
Debtor 2 only Debtor 1 and Debtor 2 only	that you did not report as priority claims	
Debtor 1 and Debtor 2 only At least one of the debtors and another	Debts to pension or profit-sharing plans, and other similar debts	
☐ Check if this claim is for a community debt	✓ Other. Specify Medical	
Is the claim subject to offset?		
☑ No		
Yes		
4.22		\$117,000.00
Mays Trust #2	Last 4 digits of account number	<u> </u>
Nonpriority Creditor's Name	When was the debt incurred?	
914 S Tyler St Number Street	As of the date you file, the claim is: Check all that apply.	
	_ Contingent	
	☐ Unliquidated ☐ ☐ Disputed	
Amarillo TX 79101		
City State ZIP Code Who incurred the debt? Check one.	Type of NONPRIORITY unsecured claim:	
Debtor 1 only	☐ Student loans ☐ Obligations arising out of a separation agreement or divorce	
Debtor 2 only	that you did not report as priority claims	
✓ Debtor 1 and Debtor 2 only✓ At least one of the debtors and another	Debts to pension or profit-sharing plans, and other similar debts	
Check if this claim is for a community debt		
Is the claim subject to offset?	Lease	
✓ No		
Yes		
4.23		\$300.00
Navient	Last 4 digits of account number	Ψοσο.σο
Nonpriority Creditor's Name	When was the debt incurred?	
123 Justison Street 3rd Floor Number Street	As of the date you file, the claim is: Check all that apply.	
	_ Contingent	
	☐ Unliquidated ☐ Disputed	
Wilmington DE 19801		
City State ZIP Code Who incurred the debt? Check one.	Type of NONPRIORITY unsecured claim:	
Debtor 1 only		
Debtor 2 only	that you did not report as priority claims	
Debtor 1 and Debtor 2 only At least one of the debtors and another	☐ Debts to pension or profit-sharing plans, and other similar debts	
—	Other. Specify	
S the claim subject to offset?		
✓ No		
T Yes		

Case 21-31704-sgj7 Doc 1 Filed 09/24/21 Entered 09/24/21 10:12:48 Desc Main Document Page 34 of 67

Debtor 1 Christopher Grider Debtor 2 Crystal Grider	Case number (if known)	
Part 2: Your NONPRIORITY Unsecu	red Claims Continuation Page	
After listing any entries on this page, number the previous page.	em sequentially from the	Total claim
4.24		\$431.00
NTTA	Last 4 digits of account number	
Nonpriority Creditor's Name PO Box 660244	When was the debt incurred?	
Number Street	As of the date you file, the claim is: Check all that apply.	
	_ Contingent	
	☐ Unliquidated ☐ ☐ Disputed	
Dallas TX 75266		
City State ZIP Code Who incurred the debt? Check one.	Type of NONPRIORITY unsecured claim:	
Debtor 1 only	Student loans	
Debtor 2 only	 Obligations arising out of a separation agreement or divorce that you did not report as priority claims 	
Debtor 1 and Debtor 2 only	Debts to pension or profit-sharing plans, and other similar debts	
At least one of the debtors and another	☑ Other. Specify	
Check if this claim is for a community debt	Tolls	
Is the claim subject to offset? ✓ No		
☑ No ☐ Yes		
4.25		\$10.00
Pike Pass	Last 4 digits of account number	
Nonpriority Creditor's Name 4401 W Memorial Rd, Ste 130	When was the debt incurred?	
Number Street	As of the date you file, the claim is: Check all that apply.	
	_ Contingent	
	☐ Unliquidated ☐ Disputed	
Oklahoma City OK 73134		
City State ZIP Code Who incurred the debt? Check one.	Type of NONPRIORITY unsecured claim:	
Debtor 1 only	Student loans	
Debtor 2 only	 Obligations arising out of a separation agreement or divorce that you did not report as priority claims 	
Debtor 1 and Debtor 2 only	Debts to pension or profit-sharing plans, and other similar debts	
At least one of the debtors and another	Other. Specify	
☑ Check if this claim is for a community debt	Tolls	
Is the claim subject to offset?		
☑ No □ Yes		
4.26		\$219.00
Providence Health Alliance	Last 4 digits of account number	
Nonpriority Creditor's Name Attn: 18962E	When was the debt incurred?	
Number Street	As of the date you file, the claim is: Check all that apply.	
PO Box 14000	_ Contingent	
	☐ Unliquidated ☐ Disputed	
Belfast ME 04915		
City State ZIP Code Who incurred the debt? Check one.	Type of NONPRIORITY unsecured claim:	
Debtor 1 only	Student loans	
Debtor 2 only	 Obligations arising out of a separation agreement or divorce that you did not report as priority claims 	
Debtor 1 and Debtor 2 only	Debts to pension or profit-sharing plans, and other similar debts	
At least one of the debtors and another	✓ Other. Specify	
☐ Check if this claim is for a community debt	Medical	
Is the claim subject to offset?		
☑ No ☐ Yes		
□ ···		

Case 21-31704-sgj7 Doc 1 Filed 09/24/21 Entered 09/24/21 10:12:48 Desc Main Document Page 35 of 67

### Additional Consultants of Texas Additional Consultants of Texas Last 4 digits of account number	Debtor 1 Christopher Grider Debtor 2 Crystal Grider	Case number (if known)	
Act	Part 2: Your NONPRIORITY Unsecu	red Claims Continuation Page	
Last 4 digits of account number Money as the debt incurred?	After listing any entries on this page, number the previous page.	em sequentially from the	Total claim
When was the debt incurred? As of the date you file, the claim is: Check all that apply.	4.27		\$79.00
Attin: 1089 Number Street PO Box 3484 Contingent Deliber 1 conty Deliber 1 conty Deliber 2 conty Deliber 2 conty Deliber 2 conty Deliber 2 conty Deliber 3 conty Deliber 3 conty Deliber 4 conty Deliber 5 conty Deliber 5 conty Deliber 6 conty Deliber 7 conty Deliber 7 conty Deliber 6 conty Deliber 7 conty Deliber 1 co	Radiology Consultants of Texas	Last 4 digits of account number	· · · · · · · · · · · · · · · · · · ·
As of the date you flie, the claim is: Check all that apply.		When was the debt incurred?	
Toledo OH 43607 Or Stree / P Code Who Incurred the debt? Check one. Debtor 1 only Debtor 1 only Debtor 2 only At least one of the debtors and another Check if this claim is for a community debt is the claim subject to offset? Number Street As of the debty Check one. Debtor 1 and Debtor 2 only Medical Last 4 digits of account number Who incurred the debt? Check one. Debtor 1 and Debtor 2 only Debtor 2 only Debtor 3 only Creations and another Check if this claim is for a community debt is the claim subject to offset? Number Street Last 4 digits of account number Whon was the debt incurred? As of the date you file, the claim is: Check all that apply. Contingent Unliquidated Debtor 2 only Debtor 2 only Debtor 3 only Creations and another Check if this claim is for a community debt is the claim subject to offset? No Contingent Unliquidated Disputed Type of NONPRIORITY unsecured claim: Student loans Debtor 2 only Unliquidated Disputed Type of NONPRIORITY unsecured claim: Student loans Debtor 2 only Unliquidated Disputed Type of NONPRIORITY unsecured claim: Student loans Debtor 2 only Unliquidated Disputed Type of NONPRIORITY unsecured claim: Student loans Debtor 2 only Unliquidated Disputed Type of NONPRIORITY unsecured claim: Student loans Debtor 2 only Debtor 2 only Debtor 3 only Debtor 4 only Debtor 3 only Debtor 5 only Debtor 6 only Debtor 6 only Debtor 7 only Debtor 8 only Debtor 8 only Debtor 9 only Debto	Number Street	As of the date you file, the claim is: Check all that apply.	
Disputed	PO Box 3484		
Type of NONPRIORITY unsecured claim: Type of NONPRIORITY unsecured claim: Type of NonPriority claims State 2 process State 3 proc			
Who incurred the debt? Check one. Student loans Student lo			
Debtor 1 only Debtor 2 only Debtor 2 only Debtor 1 and Debtor 3 on a community debt is the claim subject to offset? Medical Me	-	••	
Debtor 2 only			
At least one of the debtors and another yellow for the claim is for a community debt is the claim subject to offset? All part	□		
Check if this claim is for a community debt is the claim subject to offset? No		☐ Debts to pension or profit-sharing plans, and other similar debts	
Is the claim subject to offset? Nor Pos Noncurred the debtor 2 only A 29 Noncurred the debtor 3 and another Post Rest to the date you file, the claim is: Check all that apply. Check if this claim is for a community debt is the claim Street Noncurred the debt? Check one. A 29 Synerprise Consulting Service Noncurred the debt? Check one. A 29 Synerprise Consulting Service Noncurred the debt? Check one. A 29 Synerprise Consulting Service Noncorron (Creditor's Name When was the debt incurred? A 29 Synerprise Consulting Service Noncorron (Creditor's Name When was the debt incurred? A 29 Synerprise Consulting Service Noncorron (Creditor's Name When was the debt incurred? A 29 Synerprise Consulting Service Noncorron (Creditor's Name When was the debt incurred? A 20 of the date you file, the claim is: Check all that apply. Contingent Utilities \$504.00 Type of NONPRIORITY unsecured claim: When was the debt incurred? A 29 Synerprise Consulting Service Noncorron (Creditor's Name When was the debt incurred? A 20 of the date you file, the claim is: Check all that apply. Contingent Unliquidated Disputed Type of NONPRIORITY unsecured claim: Yellow (Creditor's Name) When was the debt incurred? Type of NONPRIORITY unsecured claim: Yellow (Creditor's Name) When was the debt incurred? Type of NONPRIORITY unsecured claim: Yellow (Creditor's Name) Type of NONPRIORITY unsecured claim: Yellow (Creditor's Name) When was the debt incurred? Type of NONPRIORITY unsecured claim: Yellow (Creditor's Name) Student loans Obligations arising out of a separation agreement or divorce that you did not report as priority claims Debtor 1 and Debtor 2 only Debtor 1	ш		
State Street St	_	Medical	
Reliant Energy Nonpriority Creditor's Name PO Box 650475 Number Street Conlingent Uniquidated			
Reliant Energy Nonpriority Creditor's Name PO Box 650475 Number Street Contingent Unliquidated Disputed	— V		
Reliant Energy Nonpriority Creditor's Name PO Box 650475 Number Street Contingent Unliquidated Disputed	4.20		
When was the debt incurred? As of the date you file, the claim is: Check all that apply. Contingent Unliquidated Disputed		Lord A Patron Control of Control	\$1,467.00
Number Street As of the date you file, the claim is: Check all that apply. Contingent Unliquidated Disputed Type of NONPRIORITY unsecured claim: Student loans Debtor 1 only Debtor 1 and Debtor 2 only At least one of the debtors and another Consulting Service Last 4 digits of account number Nonpriority Creditor's Name PO Box 957 Number Street As of the date you file, the claim is: Check all that apply. Student loans Obligations arising out of a separation agreement or divorce that you did not report as priority claims Debts to pension or profit-sharing plans, and other similar debts When was the debt incurred? As of the date you file, the claim is: Check all that apply. Contingent Unliquidated Unliquidated Unliquidated Unliquidated Obligations arising out of a separation agreement or divorce that you did not report as priority claims State Type of NONPRIORITY unsecured claim: When was the debt incurred? As of the date you file, the claim is: Check all that apply. Contingent Unliquidated Unli			
Dallas TX 75265 City State ZIP Code Who incurred the debt? Check one. □ Debtor 1 only □ Debtor 2 only □ At least one of the debtors and another □ Check if this claim is for a community debt is the claim subject to offset? ■ As of the date you file, the claim is: Check all that apply. □ Check one. □ Debtor 1 only □ Debtor 1 only □ Debtor 2 only □ Check if this claim is for a community debt is the claim subject to offset? □ No □ Yes □ No □ Yes □ No □ Yes □ Debte 1 only □ Debtor 2 only □ Debtor 3 only □ Debtor 3 only □ Debtor 4 only □ Debtor 4 only □ Debtor 4 only □ Debtor 1 only □ Debtor 1 only □ Debtor 1 only □ Debtor 1 only □ Debtor 3 only □ Check if this claim is for a community debt is the claim subject to offset? □ Check one. □ Debtor 1 only □ Debtor 1 only □ Debtor 2 only □ Check if this claim is for a community debt is the claim subject to offset? □ Check one. □ Check if this claim is for a community debt is the claim subject to offset? □ Check if this claim is for a community debt is the claim subject to offset? □ Check one. □ Debtor 1 only □ Debtor 2 only □ Check if this claim is for a community debt is the claim subject to offset? □ Check one. □ Debtor 1 only □ Debtor 2 only □ Check if this claim is for a community debt is the claim subject to offset? □ Check one. □ Debtor 1 only □ Debtor 2 only □ Check if this claim is for a community debt is the claim subject to offset? □ Check offset? □ Check offset? □ Check offset? □ Check if this claim is for a community debt is the claim subject to offset? □ Check offset? □ C	PO Box 650475		
Dallas TX 75265 City State ZiP Code Check one.	Number Street	<u> </u>	
Dallas TX 75265 City State ZIP Code Who incurred the debt? □ Debtor 1 only □ Debtor 2 only □ Debtor 1 and Debtor 2 only □ Check if this claim is for a community debt Is the claim subject to offset? □ Yes 4.29 Synerprise Consulting Service Last 4 digits of account number Whon was the debt incurred? As of the date you file, the claim is: Check all that apply. □ Contingent □ Unliquidated □ Disputed Type of NONPRIORITY unsecured claim: □ Student loans □ Obligations arising out of a separation agreement or divorce that you did not report as priority claims □ Debtor 1 only □ Debtor 2 only □ Vilities \$504.00 \$504.00 \$504.00 \$504.00 \$504.00 \$504.00 \$504.00 \$504.00 \$504.00 \$504.00 \$504.00 \$504.00 \$504.00 \$504.00 \$504.00 \$504.00 \$504.00 \$504.00 \$504.00 \$504.00 \$504.00 \$504.00 \$504.00 \$504.00 \$504.00 \$504.00 \$504.00 \$504.00 \$504.00 \$504.00 \$504.00 \$504.00 \$504.00 \$504.00 \$504.00 \$504.00 \$504.00 \$504.00 \$504.00 \$504.00 \$504.00 \$504.00 \$504.00 \$504.00 \$504.00 \$504.00 \$504.00 \$504.00 \$504.00 \$504.00 \$504.00 \$504.00 \$504.00 \$504.00 \$504.00 \$504.00 \$504.00 \$504.00 \$504.00 \$504.00 \$504.00 \$504.00 \$504.00 \$504.00 \$504.00 \$504.00 \$504.00 \$504.00 \$504.00 \$504.00 \$504.00 \$504.00 \$504.00 \$504.00 \$504.00 \$504.00 \$504.00 \$504.00 \$504.00 \$504.00 \$504.00 \$504.00 \$504.00 \$504.00 \$504.00 \$504.00 \$504.00 \$504.00 \$504.00 \$504.00 \$504.00 \$504.00 \$504.00 \$504.00 \$504.00 \$504.00 \$504.00 \$504.00 \$504.00 \$504.00 \$504.00 \$504.00 \$504.00 \$504.00 \$504.00 \$504.00 \$504.00 \$504.00 \$504.00 \$504.00 \$504.00 \$504.00 \$504.00 \$504.00 \$504.00 \$504.00 \$504.00 \$504.00 \$504.00 \$504.00 \$504.00 \$504.00 \$504.00 \$504.00 \$504.00 \$504.00 \$504.00 \$504.00 \$504.00 \$504.00 \$504.00 \$504.00 \$504.00 \$504.00 \$504.00 \$504.00 \$504.00 \$504.00 \$504.00 \$504.00 \$504.00 \$504.00 \$504.00 \$504.00 \$504.00 \$504.00 \$504.00 \$504.00 \$504.00 \$504.00 \$504.00 \$504.00 \$504.00 \$504.00 \$504.00 \$504.00 \$504.00 \$504.00 \$504.00 \$504.00		— *	
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As of the date you file, the claim is: Check all that apply. Contingent Unliquidated	Nonpriority Creditor's Name		
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At least one of the debtors and another Check if this claim is for a community debt Is the claim subject to offset? No	<u> </u>		
Check if this claim is for a community debt Medical Is the claim subject to offset? No			
 Is the claim subject to offset? ☑ No	Check if this claim is for a community debt		
	Is the claim subject to offset?		
	No Voc		

Case 21-31704-sgj7 Doc 1 Filed 09/24/21 Entered 09/24/21 10:12:48 Desc Main Document Page 36 of 67

Debtor 1 Debtor 2 Crystal Grider Crystal Grider Case number (if known) Your NONPRIORITY Unsecured Claims Continuation Page		
4.30		\$783.00
Technology Insurance Company, Inc	Last 4 digits of account number	
Nonpriority Creditor's Name 8948 Canyon Falls Blvd, Ste 200	When was the debt incurred?	
Number Street	As of the date you file, the claim is: Check all that apply.	
	□ Contingent □ Unliquidated	
	□ Disputed	
Twinsburg OH 44087 City State ZIP Code	- (NONDRIGHTY	
Who incurred the debt? Check one.	Type of NONPRIORITY unsecured claim: Student loans	
Debtor 1 only	☐ Obligations arising out of a separation agreement or divorce	
Debtor 2 only Debtor 1 and Debtor 2 only	that you did not report as priority claims	
Debtor 1 and Debtor 2 only At least one of the debtors and another	☐ Debts to pension or profit-sharing plans, and other similar debts ☐ Other. Specify	
☐ Check if this claim is for a community debt	✓ Other. Specify Insurance	
Is the claim subject to offset?		
☑ No		
Yes		
4.31		\$672.00
Technology Insurance Company, Inc	Last 4 digits of account number	
Nonpriority Creditor's Name	When was the debt incurred?	
8948 Canyon Falls Blvd, Ste 200 Number Street	As of the date you file, the claim is: Check all that apply.	
	_ Contingent	
	☐ Unliquidated ☐ ☐ Disputed	
Twinsburg OH 44087		
City State ZIP Code Who incurred the debt? Check one.	Type of NONPRIORITY unsecured claim:	
Debtor 1 only	☐ Student loans ☐ Obligations arising out of a separation agreement or divorce	
Debtor 2 only	that you did not report as priority claims	
Debtor 1 and Debtor 2 only At least one of the debtors and another	☐ Debts to pension or profit-sharing plans, and other similar debts	
Check if this claim is for a community debt	✓ Other. Specify Insurance	
Is the claim subject to offset?	insurance	
✓ No		
Yes		
4.32		\$5,149.00
Texas Comptroller of Public Accounts	Last 4 digits of account number	Ψ5,175.00
Nonpriority Creditor's Name	When was the debt incurred?	
PO Box 13528 Number Street	As of the date you file, the claim is: Check all that apply.	
Capitol Station	_ Contingent	
	Unliquidated	
Austin TX 78711	Disputed	
City State ZIP Code Who incurred the debt? Check one.	Type of NONPRIORITY unsecured claim:	
Debtor 1 only	Student loans Obligations origing out of a constration agreement or diverse	
Debtor 2 only	 Obligations arising out of a separation agreement or divorce that you did not report as priority claims 	
Debtor 1 and Debtor 2 only	Debts to pension or profit-sharing plans, and other similar debts	
At least one of the debtors and another	Other. Specify	
☐ Check if this claim is for a community debt	Taxes	
Is the claim subject to offset? ✓ No		
□ Yes		

Case 21-31704-sgj7 Doc 1 Filed 09/24/21 Entered 09/24/21 10:12:48 Desc Main Document Page 37 of 67

Debtor 1 Christopher Grider Debtor 2 Crystal Grider	Case number (if known)	
Part 2: Your NONPRIORITY Unsecu	red Claims Continuation Page	
After listing any entries on this page, number the previous page.	m sequentially from the	Total claim
4.33		\$11,105.00
Toast Capital	Last 4 digits of account number	
Nonpriority Creditor's Name 401 Park Drive, Suite 801	When was the debt incurred?	
Number Street	As of the date you file, the claim is: Check all that apply. Contingent Unliquidated	
Boston MA 02215	─ □ Disputed	
City State ZIP Code Who incurred the debt? Check one. Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only At least one of the debtors and another Check if this claim is for a community debt Is the claim subject to offset?	Type of NONPRIORITY unsecured claim: Student loans Obligations arising out of a separation agreement or divorce that you did not report as priority claims Debts to pension or profit-sharing plans, and other similar debts Other. Specify Business Loan	
▼ No Yes		
4.34		\$922.00
US Bank	Last 4 digits of account number	
Nonpriority Creditor's Name Attn: CBDH	When was the debt incurred?	
Number Street	As of the date you file, the claim is: Check all that apply.	
PO Box 3447	_ Contingent	
	☐ Unliquidated ☐ ☐ Disputed	
Oshkosh WI 54903		
City State ZIP Code Who incurred the debt? Check one. Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only At least one of the debtors and another Check if this claim is for a community debt Is the claim subject to offset?	Type of NONPRIORITY unsecured claim: Student loans Obligations arising out of a separation agreement or divorce that you did not report as priority claims Debts to pension or profit-sharing plans, and other similar debts Other. Specify Automobile Loan	
Yes		
4.35		\$275.00
Yelp Nonpriority Creditor's Name	Last 4 digits of account number	
True Accord	When was the debt incurred?	
Number Street 16011 College Blvd #130	As of the date you file, the claim is: Check all that apply. Contingent Unliquidated	
Lenexa KS 66219	─ □ Disputed	
City State ZIP Code Who incurred the debt? Check one. Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only At least one of the debtors and another Check if this claim is for a community debt Is the claim subject to offset?	Type of NONPRIORITY unsecured claim: Student loans Obligations arising out of a separation agreement or divorce that you did not report as priority claims Debts to pension or profit-sharing plans, and other similar debts Other. Specify Collections	
Yes		

Case 21-31704-sgj7 Doc 1 Filed 09/24/21 Entered 09/24/21 10:12:48 Desc Main Document Page 38 of 67

Debtor 1	Christopher Grider					
Debtor 2	Crystal Grider				Case number (if known)	
Part 3:	List Others to Be	e Notified Ab	oout a Debt Th	at You Already	y Listed	
5. Use this page only if you have others to be notified about your bankruptcy, for a debt that you already listed in Parts 1 or 2. For example, if a collection agency is trying to collect from you for a debt you owe to someone else, list the original creditor in Parts 1 or 2, then list the collection agency here. Similarly, if you have more than one creditor for any of the debts that you listed in Parts 1 or 2, list the additional creditors here. If you do not have additional parties to be notified for any debts in Parts 1 or 2, do not fill out or submit this page.						
Underwo	od Law Firm, P.C.		On which e	ntry in Part 1 or F	Part 2 did you list the original creditor?	
Name Attn: Roo	er Cox		Line	of (Check one):	☐ Part 1: Creditors with Priority Unsecured Claims	
Number Street 500 S. Taylor, Suite 1200 LB 233			Legal	- ` ´		
500 S. Ta	ylor, Suite 1200 LB 23	33			Part 2: Creditors with Nonpriority Unsecured Claims	

Case 21-31704-sgj7 Doc 1 Filed 09/24/21 Entered 09/24/21 10:12:48 Desc Main Document Page 39 of 67

Debtor 1	Christopher Grider	
Debtor 2	Crystal Grider	Case number (if known)
	· •	

Part 4: Add the Amounts for Each Type of Unsecured Claim

Total the amounts of certain types of unsecured claims. This information is for statistical reporting purposes only.
 U.S.C. § 159. Add the amounts for each type of unsecured claim.

				Total claim
Total claims from Part 1	6a.	Domestic support obligations	6a.	\$0.00
nom Part 1	6b.	Taxes and certain other debts you owe the government	6b.	\$0.00
	6c.	Claims for death or personal injury while you were intoxicated	6c.	\$0.00
	6d.	Other. Add all other priority unsecured claims. Write that amount here.	^{6d.} +	\$0.00
	6e.	Total. Add lines 6a through 6d.	6d.	\$0.00
				Total claim
Total claims from Part 2	6f.	Student loans	6f.	\$134,432.00
	6g.	Obligations arising out of a separation agreement or divorce that you did not report as priority claims	6g.	\$0.00
	6h.	Debts to pension or profit-sharing plans, and other similar debts	6h.	\$0.00
	6i.	Other. Add all other nonpriority unsecured claims. Write that amount here.	6i. +	\$180,199.80
	6j.	Total. Add lines 6f through 6i.	6j.	\$314,631.80

Fill in this in	formation to ic	lentify your case:		
Debtor 1	Christopher First Name	Middle Name	Grider Last Name	
	_	Middle Name		
Debtor 2 (Spouse, if filing	Crystal First Name	Middle Name	Grider Last Name	
United States B	ankruptov Court for	the: NORTHERN DI	STRICT OF TEX	(AS
	ankiupicy Court for	tile. NONTILKIN DI	STRICT OF TEX	(A)
Case number (if known)				Check if this is an
				amended filing
Official Forn	n 106G			
Schedule G	3: Executory	Contracts and	d Unexpired	Leases 12/15
On the top of any 1. Do you have No. Ch Yes. Fi 2. List separate is for (for executory co Person of 2.1 Dorothy Name	e any executory co eck this box and file Il in all of the inform ely each person o cample, rent, vehice ntracts and unexpire	entracts or unexpired this form with the countries below even if the r company with whor le lease, cell phone).	leases? urt with your other so e contracts or lease n you have the cor See the instruction	ill it out, number the entries, and attach it to this page. known). schedules. You have nothing else to report on this form. es are listed on Schedule A/B: Property (Official Form 106A/B). Intract or lease. Then state what each contract or lease as for this form in the instruction booklet for more examples of State what the contract or lease is for Home Lease 830 FM 1950 Eddy, TX 76524 Contract to be ASSUMED
Dallas		TX State	75232 ZIP Code	<u> </u>
City 2.2 Mays Tr	ruet #2	Siale	ZIF COUL	Business Lease
Name				800 S 7th St
914 S. T Number	Street			— Waco, TX 76706
				Contract to be REJECTED
Amarillo City)	TX State	79101 ZIP Code	_
•	Development Co		ZIF Code	Lease
Name	•	Ψ		Lease 109 W 3rd St
PO Box Number				— Eddy, TX 76524
				Contract to be ASSUMED
Rockwa	II	TX	75087	<u></u>
City		State	ZIP Code	

Document Page 41 of 67

Fill in this inf	ormation to i	dentify your case	:	
Debtor 1	Christopher		Grider	
	First Name	Middle Name	Last Name	
Debtor 2	Crystal		Grider	
(Spouse, if filing)	First Name	Middle Name	Last Name	
			ICTRICT OF TEVAC	
United States Bar	nkruptcy Court fo	or the: NORTHERN D	ISTRICT OF TEXAS	—— I
United States Bar Case number	nkruptcy Court fo	or the: NORTHERN D	ISTRICT OF TEXAS	-

Official Form 106H

Schedule H: Your Codebtors

12/15

Codebtors are people or entities who are also liable for any debts you may have. Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, copy the Additional Page, fill it out, and number the entries in the boxes on the left. Attach the Additional Page to this page. On the top of any Additional Pages, write your name and case number (if known). Answer every question.

1.	•	ou h No Yes	ave any codebtors?	(If you are filing a	joint case, do	o not list either	er spouse as a codebtor.)	
2.		de A No.	•	o, Louisiana, Neva	da, New Mex	ico, Puerto Rico	erritory? (Community property states and territories ico, Texas, Washington, and Wisconsin.) t the time?	
			In which community statement of your spouse, form 830 FM 1950 Number Street Eddy City		_	Texas 76524 ZIP Code	Fill in the name and current address of that persor	n.

In Column 1, list all of your codebtors. Do not include your spouse as a codebtor if your spouse is filing with you. List the person shown in line 2 again as a codebtor only if that person is a guarantor or cosigner. Make sure you have listed the creditor on Schedule D (Official Form 106D), Schedule E/F (Official Form 106E/F), or Schedule G (Official Form 106G). Use Schedule D, Schedule E/F, or Schedule G to fill out Column 2.

Column 1: Your codebtor

Column 2: The creditor to whom you owe the debt

Check all schedules that apply:

Case 21-31704-sgj7 Doc 1 Filed 09/24/21 Entered 09/24/21 10:12:48 Desc Main Document Page 42 of 67

Fill in this inforr	nation to identif	y your case:					
Debtor 1	Christopher		Grider				
	First Name	Middle Name	Last Name	Che	ck if this is:		
Debtor 2	Crystal		Grider		An amended filing		
(Spouse, if filing)	First Name	Middle Name	Last Name	— ⊔	7th amended hinig		
United States Bankruptcy Court for the:		NORTHERN DISTRICT OF TEXAS		□	A supplement showing postpetition chapter 13 income as of the following date:		
Case number					chapter to income as of the following date.		
(if known)					MM / DD / YYYY		
Official Form 10	nei				, 55,		

Schedule I: Your Income

12/15

Be as complete and accurate as possible. If two married people are filing together (Debtor 1 and Debtor 2), both are equally responsible for supplying correct information. If you are married and not filing jointly, and your spouse is living with you, include information about your spouse. If you are separated and your spouse is not filing with you, do not include information about your spouse. If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write your name and case number (if known). Answer every question.

P	art 1:	Describe Empl	oyment							
1.	informa			<u>Del</u>	btor 1			Debtor 2 or no	on-filing spou	ıse
	job, atta	f you have more than one bb, attach a separate page		Ø	Employed Not employed			✓ Employed✓ Not employed		
	addition	al employers.	Occupation	Se	If Employed			Managemen	t	
	Include part-time, seasonal, or self-employed work. Employer's name			Kissing Tree Vineyards				Kissing Tree Vineyards		
	•	tion may include	Employer's address		0 FM 1950			830 FM 1950)	
	applies.	or homemaker, if it		Nun	nber Street			Number Street		
				Ed		ТХ	76524	Eddy	ТХ	76524
				City		State	Zip Code	City	State	Zip Code

Part 2: **Give Details About Monthly Income**

Estimate monthly income as of the date you file this form. If you have nothing to report for any line, write \$0 in the space. Include your non-filing spouse unless you are separated.

7 years

1 year

If you or your non-filing spouse have more than one employer, combine the information for all employers for that person on the lines below. If you need more space, attach a separate sheet to this form.

			For Debtor 1	For Debtor 2 or non-filing spouse
2.	List monthly gross wages, salary, and commissions (before all payroll deductions). If not paid monthly, calculate what the monthly wage would be.	2.	\$0.00	\$0.00
3.	Estimate and list monthly overtime pay.	3. •	+ \$0.00	\$0.00
4.	Calculate gross income. Add line 2 + line 3.	4.	\$0.00	\$0.00

How long employed there?

Debtor 1

Christopher Grider

Deb	btor 2 Crystal Grider		Case nu	mber (if kno	wn)		
			For Debtor 1	For Deb	tor 2 or		
	Copy line 4 here	→ 4.	\$0.00		\$0.00	-	
5.	List all payroll deductions:						
	5a. Tax, Medicare, and Social Security deductions	5a.	\$0.00		\$0.00		
	5b. Mandatory contributions for retirement plans	5b.	\$0.00		\$0.00		
	5c. Voluntary contributions for retirement plans	5c.	\$0.00		\$0.00		
	5d. Required repayments of retirement fund loans	5d.	\$0.00		\$0.00		
	5e. Insurance	5e.	\$0.00		\$0.00		
	5f. Domestic support obligations	5f.	\$0.00		\$0.00		
	5g. Union dues	5g.	\$0.00		\$0.00		
	5h. Other deductions. Specify:	5h. +	\$0.00		\$0.00		
6.	Add the payroll deductions. Add lines $5a + 5b + 5c + 5d + 5e + 5g + 5h$.	of + 6.	\$0.00		\$0.00		
7.	Calculate total monthly take-home pay. Subtract line 6 from line	e 4. 7.	\$0.00		\$0.00		
8.	List all other income regularly received:						
	 Net income from rental property and from operating a business, profession, or farm 	8a.	\$1,674.00		\$0.00		
	Attach a statement for each property and business showing gross receipts, ordinary and necessary business expenses, and the total monthly net income.						
	8b. Interest and dividends	8b.	\$0.00		\$0.00		
	8c. Family support payments that you, a non-filing spouse, or a dependent regularly receive	8c.	\$0.00		\$0.00		
	Include alimony, spousal support, child support, maintenance, divorce settlement, and property settlement.						
	8d. Unemployment compensation	8d.	\$0.00		\$0.00		
	8e. Social Security	8e.	\$0.00	-	\$0.00		
	8f. Other government assistance that you regularly receive		· · · · ·				
	Include cash assistance and the value (if known) or any non- cash assistance that you receive, such as food stamps (benefits under the Supplemental Nutrition Assistance Program) or housing subsidies.)					
	Specify: VA Disability	8f.	\$500.00		\$0.00		
	8g. Pension or retirement income	8g.	\$0.00		\$0.00		
	8h. Other monthly income.	٠9.	Ψ0.00		Ψ0.00		
	Specify:	8h. +	\$0.00		\$0.00		
9.	Add all other income. Add lines 8a + 8b + 8c + 8d + 8e + 8f + 8g +	8h. 9.	\$2,174.00		\$0.00		
10.	Calculate monthly income. Add line 7 + line 9. Add the entries in line 10 for Debtor 1 and Debtor 2 or non-filing spou	10. [\$2,174.00	+	\$0.00	=[\$2,174.00
11.	State all other regular contributions to the expenses that you list	in Schedul	e J.				
	Include contributions from an unmarried partner, members of your ho friends or relatives.	ousehold, yo	ur dependents, yo	ur roommate	es, and othe	ər	
	Do not include any amounts already included in lines 2-10 or amount	s that are no	ot available to pay	expenses li	sted in Sch	edu	le J.
	Specify:				11	+ _	\$0.00
12.	Add the amount in the last column of line 10 to the amount in line income. Write that amount on the Summary of Your Assets and Liab				12.	Ĺ	\$2,174.00
40	if it applies.	#II_ 41 ! · *	0				ombined onthly income
13.	Do you expect an increase or decrease within the year after you	TILE THIS FOR	n?				
	✓ No. None.						
	Yes. Explain:						

Case 21-31704-sgj7 Doc 1 Filed 09/24/21 Entered 09/24/21 10:12:48 Desc Main Document Page 44 of 67

Debtor 1 Debtor 2	Christopher Grider Crystal Grider		Case number (if known)	
8a. Attach	ed Statement (Debtor 1)			
		Kissing Tree Vineyards	s, LLC	
Gross Mo	onthly Income:			\$3,174.00
Expense		Category	Amount	
Monthly E	xpenses		\$1,500.00	
Total Mor	nthly Expenses			\$1,500.00
Net Mont	hly Income:			\$1,674.00

Official Form 106l Schedule I: Your Income page 3

Case 21-31704-sgj7 Doc 1 Filed 09/24/21 Entered 09/24/21 10:12:48 Desc Main Document Page 45 of 67

Ī	ill in this inforn	nation to identi	fy your case:		05	if the land	
	Debtor 1	Christopher	Grid	er		if this is: n amended filing	
		First Name	Middle Name Last N	_	_	supplement showing	postpetition
	Debtor 2 (Spouse, if filing)	Crystal First Name	Grid Middle Name Last N			apter 13 expenses as lowing date:	s of the
	United States Bank	ruptcy Court for the	NORTHERN DISTRICT C	OF TEXAS	M	M / DD / YYYY	_
	Case number (if known)					.,, , , , , ,	
O	fficial Form 10)6J					
So	chedule J: Yo	 our Expense	s				12/15
nai	rrect information. I me and case numb	f more space is ne	le. If two married people are feeded, attach another sheet to wer every question.				
1.	Is this a joint cas						
2.	No. Go to lin ✓ Yes. Does ✓ No	ne 2. Debtor 2 live in a sets. S. Debtor 2 must fil	eparate household? e Official Form 106J-2, Expens No	·			Dogo donondont
	Do not list Debtor Debtor 2.	1 and	Yes. Fill out this information for each dependent	Dependent's relation Debtor 1 or Debtor 2		Dependent's age	Does dependent live with you?
	Debiol 2.			Son		14	□ No · ☑ Yes
	Do not state the d names.	ependents'		Son		11	No Yes
				Son		3	No Yes No
							Yes No Yes
3.	Do your expense expenses of peo yourself and you	ple other than	✓ No ☐ Yes				
Ŀ	Part 2: Estima	ate Your Ongoi	ng Monthly Expenses				
to		of a date after the	ruptcy filing date unless you bankruptcy is filed. If this is				
	•		h government assistance if yo n Schedule I: Your Income (Of			Your expens	es
4.			enses for your residence. any rent for the ground or lot.			4.	
	If not included in	line 4:					
	4a. Real estate t	axes				4a	
	4b. Property, hor	meowner's, or renter	r's insurance			4b	
	4c. Home mainte	enance, repair, and	upkeep expenses			4c	
	4d. Homeowner's	s association or con	dominium dues			4d.	

Case 21-31704-sgj7 Doc 1 Filed 09/24/21 Entered 09/24/21 10:12:48 Desc Main Document Page 46 of 67

	tor 1 tor 2	Christopher Grider Crystal Grider	Case number (if known)		
			Your expenses	s	
5.	Addit	ional mortgage payments for your residence, such as home equity loans	5.		
6.	Utilitie	es:			
	6a. E	Electricity, heat, natural gas	6a.	\$350.00	
	6b. V	Nater, sewer, garbage collection	6b	\$150.00	
		Felephone, cell phone, Internet, satellite, and cable services	6c		
		Other. Specify:	6d.		
7.	Food	and housekeeping supplies	7.	\$1,200.00	
8.	Child	care and children's education costs	8.		
9.	Cloth	ing, laundry, and dry cleaning	9.		
10.	Perso	onal care products and services	10.		
11.	Medic	cal and dental expenses	11.		
12.		sportation. Include gas, maintenance, bus or train Do not include car payments.	12.	\$350.00	
13.		tainment, clubs, recreation, newspapers, zines, and books	13.		
14.	Chari	table contributions and religious donations	14.	\$400.00	
15.	Insura Do no	ance. t include insurance deducted from your pay or included in lines 4 or 20.			
	15a.	Life insurance	15a.		
	15b.	Health insurance	15b		
	15c.	Vehicle insurance	15c	\$500.00	
	15d.	Other insurance. Specify:	15d		
16.	Taxes Specif	, , ,	16		
17.	Instal	llment or lease payments:			
	17a.	Car payments for Vehicle 1 Automobile	17a.	\$485.00	
	17b.	Car payments for Vehicle 2	17b		
	17c.	Other. Specify:	17c.		
	17d.	Other. Specify:	17d		
18.		payments of alimony, maintenance, and support that you did not report as cted from your pay on line 5, Schedule I, Your Income (Official Form 106I).	18.		
19.	Other Speci	payments you make to support others who do not live with you.	19.		
20.		real property expenses not included in lines 4 or 5 of this form or on dule I: Your Income.			
	20a.	Mortgages on other property	20a		
	20b.	Real estate taxes	20b		
	20c.	Property, homeowner's, or renter's insurance	20c.		
	20d.	Maintenance, repair, and upkeep expenses	20d		
	20e.	Homeowner's association or condominium dues	20e		

Case 21-31704-sgj7 Doc 1 Filed 09/24/21 Entered 09/24/21 10:12:48 Desc Main Document Page 47 of 67

Debtor 1 Debtor 2		Christopher Grider Crystal Grider	Case number (if known)				
21.	Other.	Specify:	21.	+			
22.	Calcul	ate your monthly expenses.					
	22a.	Add lines 4 through 21.	22a.	\$3,435.00			
	22b.	Copy line 22 (monthly expenses for Debtor 2), if any, from Official Form 106J-2.	22b.				
	22c.	Add line 22a and 22b. The result is your monthly expenses.	22c.	\$3,435.00			
23.	Calcul	ate your monthly net income.					
	23a.	Copy line 12 (your combined monthly income) from Schedule I.	23a.	\$2,174.00			
	23b.	Copy your monthly expenses from line 22c above.	23b.	- \$3,435.00			
		Subtract your monthly expenses from your monthly income. The result is your monthly net income.	23c.	(\$1,261.00)			
24.	Do you	expect an increase or decrease in your expenses within the year after you fil	le this form?				
	For example, do you expect to finish paying for your car loan within the year or do you expect your mortgage payment to increase or decrease because of a modification to the terms of your mortgage?						
	✓ No	es. Explain here: None.					

Case 21-31704-sgj7 Doc 1 Filed 09/24/21 Entered 09/24/21 10:12:48 Desc Main Document Page 48 of 67

Fill in this inf	ormation to i						
Debtor 1	Christopher		Grider				
	First Name	Middle Name	Last Name	_			
Debtor 2	Crystal		Grider				
(Spouse, if filing)	First Name	Middle Name	Last Name	_			
United States Bankruptcy Court for the: NORTHERN DISTRICT OF TEXAS							
Case number				-	Check if this is a		
(if known)					amended filing		

Official Form 106Sum

Summary of Your Assets and Liabilities and Certain Statistical Information

12/15

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. Fill out all of your schedules first; then complete the information on this form. If you are filing amended schedules after you file your original forms, you must fill out a new Summary and check the box at the top of this page.

P	art 1: Summarize Your Assets	
		Your assets Value of what you own
1.	Schedule A/B: Property (Official Form 106A/B)	
	1a. Copy line 55, Total real estate, from Schedule A/B	\$0.00
	1b. Copy line 62, Total personal property, from Schedule A/B	\$102,423.00
	1c. Copy line 63, Total of all property on Schedule A/B	\$102,423.00
P	art 2: Summarize Your Liabilities	
		Your liabilities Amount you owe
2.	Schedule D: Creditors Who Have Claims Secured by Property (Official Form 106D) 2a. Copy the total you listed in Column A, Amount of claim, at the bottom of the last page of Part 1 of Schedule D	\$464,824.37
3.	Schedule E/F: Creditors Who Have Unsecured Claims (Official Form 106E/F) 3a. Copy the total claims from Part 1 (priority unsecured claims) from line 6e of Schedule E/F	\$0.00
	3b. Copy the total claims from Part 2 (nonpriority unsecured claims) from line 6j of Schedule E/F	+\$314,631.80
	Your total liabilities	\$779,456.17
F	art 3: Summarize Your Income and Expenses	
4.	Schedule I: Your Income (Official Form 106I) Copy your combined monthly income from line 12 of Schedule I	\$2,174.00
5.	Schedule J: Your Expenses (Official Form 106J) Copy your monthly expenses from line 22c of Schedule J	\$3,435.00

Case 21-31704-sgj7 Doc 1 Filed 09/24/21 Entered 09/24/21 10:12:48 Desc Main Document Page 49 of 67

	otor 1 otor 2		if known)	
P	art 4	4: Answer These Questions for Administrative and Statistical Records	i	
6.	Are	re you filing for bankruptcy under Chapters 7, 11, or 13?		
		No. You have nothing to report on this part of the form. Check this box and submit this form to Yes	to the court with your ot	her schedules.
7.	Wha	hat kind of debt do you have?		
		Your debts are primarily consumer debts. Consumer debts are those "incurred by an indiv family, or household purpose." 11 U.S.C. § 101(8). Fill out lines 8-9g for statistical purposes. Your debts are not primarily consumer debts. You have nothing to report on this part of the this form to the court with your other schedules.	28 U.S.C. § 159.	
3.		rom the Statement of Your Current Monthly Income: Copy your total current monthly income fulficial Form 122A-1 Line 11; OR, Form 122B Line 11; OR, Form 122C-1 Line 14.	rom	
).	Сор	opy the following special categories of claims from Part 4, line 6 of <i>Schedule E/F:</i>		
		т	otal claim	
	Fro	rom Part 4 on Schedule E/F, copy the following:		
	9a.	a. Domestic support obligations. (Copy line 6a.)		
	9b.	o. Taxes and certain other debts you owe the government. (Copy line 6b.)		
	9c.	c. Claims for death or personal injury while you were intoxicated. (Copy line 6c.)		
	9d.	d. Student loans. (Copy line 6f.)		
	9e.	e. Obligations arising out of a separation agreement or divorce that you did not report as priority claims. (Copy line 6g.)		
	9f.	. Debts to pension or profit-sharing plans, and other similar debts. (Copy line 6h.)		
	9g.	g. Total. Add lines 9a through 9f.		

Case 21-31704-sgj7 Doc 1 Filed 09/24/21 Entered 09/24/21 10:12:48 Desc Main Document Page 50 of 67

ormation to ide	entify your case	:	
Christopher		Grider	
First Name	Middle Name	Last Name	-
Crystal		Grider	_
First Name	Middle Name	Last Name	
nkruptcy Court for the	he: NORTHERN D	ISTRICT OF TEXAS	_
			☐ Check if this is an
			amended filling
106Dec			_
	ara da a la Bala	anta Oalva dadaa	
About an Inc	dividual Debt	or's Schedules	12/15
rty, or obtaining m	oney or property by	y fraud in connection with a	dules. Making a false statement, bankruptcy case can result in fines up to
rty, or obtaining m	oney or property by		bankruptcy case can result in fines up to
rty, or obtaining m isonment for up to gn Below	oney or property by 20 years, or both.	y fraud in connection with a	bankruptcy case can result in fines up to 9, and 3571.
rty, or obtaining m isonment for up to gn Below	oney or property by 20 years, or both.	y fraud in connection with a 18 U.S.C. §§ 152, 1341, 1519	bankruptcy case can result in fines up to 9, and 3571.
rty, or obtaining m isonment for up to gn Below	oney or property by 20 years, or both.	y fraud in connection with a 18 U.S.C. §§ 152, 1341, 1519	bankruptcy case can result in fines up to 9, and 3571.
	Crystal First Name nkruptcy Court for t 106Dec About an Incopple are filing toge	First Name Middle Name Crystal First Name Middle Name nkruptcy Court for the: NORTHERN D 1 106Dec About an Individual Debt	First Name Middle Name Last Name Crystal Grider First Name Middle Name Last Name nkruptcy Court for the: NORTHERN DISTRICT OF TEXAS

X /s/ Crystal Grider

Date 09/24/2021

Crystal Grider, Debtor 2

MM / DD / YYYY

X /s/ Christopher Grider

Date 09/24/2021

Christopher Grider, Debtor 1

MM / DD / YYYY

Case 21-31704-sgj7 Doc 1 Filed 09/24/21 Entered 09/24/21 10:12:48 Desc Main Document Page 51 of 67

Fill in this in	formation to iden	tify your case:			
Debtor 1	Christopher	Grider			
	First Name	Middle Name Last Name			
Debtor 2 (Spouse, if filing)	Crystal First Name	Middle Name Cast Name			
		: NORTHERN DISTRICT OF 1	FYAS		
	inkrupicy Court for the	NORTHERN DISTRICT OF I	EXAS		
Case number (if known)	_			☐ Check if th amended f	
Official Form	107			amended	iiiig
Official Form Statement		fairs for Individuals F	iling for Bankrı	uptcv	04/19
correct information your name and ca	on. If more space is a ase number (if knowr	ble. If two married people are fineeded, attach a separate sheet a). Answer every question. Your Marital Status and W	to this form. On the to	op of any additional page	
1. What is your Married Not marri	current marital statu	is?			
☑ No		lived anywhere other than where ived in the last 3 years. Do not income	•	w.	
(Community _I	•	ver live with a spouse or legal ed ritories include Arizona, California	•		•
☐ No ☑ Yes. Mal	ke sure you fill out <i>Scl</i>	nedule H: Your Codebtors (Official	Form 106H).		
Part 2: Ex	plain the Sources	s of Your Income			
Fill in the tota If you are filin	I amount of income yo	nployment or from operating a bout received from all jobs and all but have income that you receive tog	isinesses, including par	t-time activities.	llendar years?
V 103. 1111	in the details.	D.H 4		D.LL.	
		Debtor 1		Debtor 2	
		Sources of income Check all that apply.	Gross income (before deductions and exclusions	Sources of income Check all that apply.	Gross income (before deductions and exclusions
From January 1 of the date you filed	of the current year un for bankruptcy:	til Wages, commissions, bonuses, tips	\$79,627.00	Wages, commissions, bonuses, tips	
		✓ Operating a business		Operating a business	
For the last calen	•	☐ Wages, commissions, bonuses, tips	\$373,183.00	☐ Wages, commissions, bonuses, tips	
(January 1 to Dece	ember 31, <u>2020</u>) <u>YYYY</u>	Operating a business		Operating a business	
For the calendar		☐ Wages, commissions, bonuses, tips	\$869,155.00	☐ Wages, commissions, bonuses, tips	
(January 1 to Dece	ember 31, <u>2019</u>)	Operating a business		Operating a business	

Case 21-31704-sgj7 Doc 1 Filed 09/24/21 Entered 09/24/21 10:12:48 Desc Main Document Page 52 of 67

	otor 1 otor 2	Christopher Grider Crystal Grider			Case number (if knov	vn)		
5.	Include unemple	receive any other income during this year or the two previous calendar years? income regardless of whether that income is taxable. Examples of other income are alimony; child support; Social Security; byment; and other public benefit payments; pensions; rental income; interest; dividends; money collected from lawsuits; royalties; inbling and lottery winnings. If you are in a joint case and you have income that you received together, list it only once under 1.						
	List eac	ch source and the gross income from each	source separa	ately. Do not include	income that you liste	ed in line 4.		
	☑ No □ Yes	s. Fill in the details.						
P	art 3:	List Certain Payments You Ma	de Before \	You Filed for Ba	nkruptcy			
ò.	Are eith	ner Debtor 1's or Debtor 2's debts prima	rily consume	r debts?				
	□ No.	Neither Debtor 1 nor Debtor 2 has pr "incurred by an individual primarily for	•			l in 11 U.S.C. § 101(8) as		
		During the 90 days before you filed for	bankruptcy, di	d you pay any credito	or a total of \$6,825*	or more?		
		☐ No. Go to line 7.						
	Yes. List below each creditor to whom you paid a total of \$6,825* or more in one or more payments and the total amount you paid that creditor. Do not include payments for domestic support obligations, such as child support and alimony. Also, do not include payments to an attorney for this bankruptcy case.							
		* Subject to adjustment on 4/01/22 and	l every 3 years	after that for cases t	filed on or after the d	ate of adjustment.		
	∀ Yes	s. Debtor 1 or Debtor 2 or both have pr	imarily consu	mer debts.				
	_	During the 90 days before you filed for	bankruptcy, di	d you pay any credite	or a total of \$600 or r	more?		
		☐ No. Go to line 7.						
	Yes. List below each creditor to whom you paid a total of \$600 or more and the total amount you paid that creditor. Do not include payments for domestic support obligations, such as child support and alimony. Also, do not include payments to an attorney for this bankruptcy case.							
			Dates of payment	Total amount paid	Amount you still owe	Was this payment for		
	Auto Fi	nance, LLC	_	\$1,093.00	\$15,636.00	Mortgage		
	Box 16		Monthly			☑ Car		
	nber Str		_			☐ Credit card ☐ Loan repayment		
			_			Suppliers or vendors		
	wiston	ME 04243	_			Other		
City		State ZIP Code						

Case 21-31704-sgj7 Doc 1 Filed 09/24/21 Entered 09/24/21 10:12:48 Desc Main Document Page 53 of 67

	otor 1 otor 2	Christopher Grider Crystal Grider		Case number (if I	known)	
7.	Insiders corpora agent, i	s include your relatives; an tions of which you are an o	y general partners; relatives of ar officer, director, person in control, s you operate as a sole proprieto	ayment on a debt you owed any ny general partners; partnerships or or owner of 20% or more of their vr. 11 U.S.C. § 101. Include paym	of which you are a voting securities;	general partner; and any managing
	_	s. List all payments to an i				
8.		1 year before you filed fo ed an insider?	r bankruptcy, did you make any	payments or transfer any prop	erty on account	of a debt that
	Include	payments on debts guarar	nteed or cosigned by an insider.			
	✓ No ☐ Yes	s. List all payments that be	enefited an insider.			
Р	art 4:	Identify Legal Acti	ons, Repossessions, and	Foreclosures		
9.	List all	•	rsonal injury cases, small claims	in any lawsuit, court action, or a actions, divorces, collection suits,		-
	□ No ✓ Yes	s. Fill in the details.				
Cas	se title		Nature of the case	Court or agency		Status of the case
Lav	wsuit		Lawsuit	170th McLennan C Court Name	ounty	Pending
				Number Street		On appeal
Cas	se numbe	er 2021-2102-4				Concluded
				City	State ZIP Co	ode
Cas	se title		Nature of the case	Court or agency		Status of the case
Lav	vsuit			Justice of the Peac	ce Precinct 4	Pending
				Court Name		✓ Fending
				Falls County Number Street		On appeal
Cas	se numbe	Pr DCM 210074				Concluded
				City	State ZIP Co	ode
				•		
10.	seized,	1 year before you filed fo or levied? all that apply and fill in the		property repossessed, foreclose	ed, garnished, at	tached,
	<u> </u>	. Go to line 11. s. Fill in the information be	low.			

Case 21-31704-sgj7 Doc 1 Filed 09/24/21 Entered 09/24/21 10:12:48 Desc Main Document Page 54 of 67

	otor 1 otor 2	Christophe Crystal Gri		ler			Case number (if kn	own)	
11. Within 90 days before you filed for bankruptcy, did an amounts from your accounts or refuse to make a payı						•		titution, set off any	′
	☑ No	s. Fill in the de	etails.						
12.		-	•		• •	ny of your property in the pr	oossession of an a	ssignee for the be	nefit of
	☑ No □ Yes	3							
Pa	art 5:	List Cert	ain G	ifts and Cor	ntribution	s			
13.	Within	2 years befor	e you	filed for bankr	uptcy, did y	ou give any gifts with a tota	al value of more th	an \$600 per perso	n?
	□ No ☑ Yes	s. Fill in the de	etails fo	or each gift.					
	s with a person	total value of	more	than \$600	Describe the gifts Guns		Dates you gave the gifts	Value	
	vid McL	ean om You Gave the	0.77		_			1/25/2021	\$3,000.00
	FM 19								-
Edo	dv		TX	76524					
City			State	ZIP Code	-				
Pers	son's rela	ationship to yo	u <u>Frie</u>	end	=				
14.		2 years befor charity?	e you	filed for bankri	uptcy, did y	ou give any gifts or contrib	outions with a tota	l value of more tha	n \$600
	□ No ☑ Yes	s. Fill in the de	etails fo	or each gift or c	ontribution.				
Gifts or contributions to charities that total more than \$600			Describe what you contri Weekly Tithe of \$100	buted	Date you contributed	Value			
	ited Met rity's Name	thodist Chui	ch						-
Num	iber Str	eet							-
Ma	orovillo			TY		•			

ZIP Code

Case 21-31704-sgj7 Doc 1 Filed 09/24/21 Entered 09/24/21 10:12:48 Desc Main Document Page 55 of 67

	otor 1 otor 2	Christopher Grider Crystal Grider Cas	se number (if known)
P	art 6:	List Certain Losses	
15.		n 1 year before you filed for bankruptcy or since you filed for bankruptcy, dic disaster, or gambling?	you lose anything because of theft, fire,
	✓ No ☐ Yes	o es. Fill in the details.	
P	art 7:	List Certain Payments or Transfers	
16.	anyone	n 1 year before you filed for bankruptcy, did you or anyone else acting on yo ne you consulted about seeking bankruptcy or preparing a bankruptcy petition and attorneys, bankruptcy petition preparers, or credit counseling agencies for some	on?
	✓ No	o es. Fill in the details.	
17.	anyone	n 1 year before you filed for bankruptcy, did you or anyone else acting on yo ne who promised to help you deal with your creditors or to make payments to to include any payment or transfer that you listed on line 16.	
	✓ No	o es. Fill in the details.	
18.		n 2 years before you filed for bankruptcy, did you sell, trade, or otherwise tra	nsfer any property to anyone, other than
		le both outright transfers and transfers made as security (such as granting of a se t include gifts and transfers that you have already listed on this statement.	curity interest or mortgage on your property).
	✓ No	o es. Fill in the details.	
19.		n 10 years before you filed for bankruptcy, did you transfer any property to a re a beneficiary? (These are often called asset-protection devices.)	self-settled trust or similar device of which
	✓ No ☐ Yes	o es. Fill in the details.	
P	art 8:	List Certain Financial Accounts, Instruments, Safe Deposit	Boxes, and Storage Units
20.	benefit Include	n 1 year before you filed for bankruptcy, were any financial accounts or instriit, closed, sold, moved, or transferred? The checking, savings, money market, or other financial accounts; certificates of dees, pension funds, cooperatives, associations, and other financial institutions.	
	✓ No	o es. Fill in the details.	

Case 21-31704-sgj7 Doc 1 Filed 09/24/21 Entered 09/24/21 10:12:48 Desc Main Document Page 56 of 67

Debtor 1 Debtor 2	Christopher Crystal Grid				Case number (if known)	
-	now have, or urities, cash, c	-	-	ore you filed for bankrup	tcy, any safe deposit box or other depo	ository
✓ No ☐ Yes	s. Fill in the det	ails.				
☑ No		•	age unit or place	other than your home w	ithin 1 year before you filed for bankru	otcy?
Part 9:	Identify P	roperty Yo	u Hold or Cont	rol for Someone Els	se	
or hold	l in trust for so	meone.	ty that someone e	lse owns? Include any	property you borrowed from, are storin	g for,
_			Where is the p	roperty?	Describe the property	Value
Dorothy Jo			_		Farm Equipment, Wine Making Equipment, Furniture	\$29,000.00
6316 Rock Canyon Trl Number Street			830 FM 1950 Number Street		_	
Dallas City	TX State	75232 ZIP Code	Eddy City	TX 76524 State ZIP Code		
			Where is the p	roperty?	Describe the property	Value
TFNB Ban Owner's Name			_		Restaurant Equipment - collaterral for loan	\$10,000.00
27000 US 8 Number Str			830 FM 1950 Number Street			
McGregor	TX	76657	Eddy	TX 76524	_	

Case 21-31704-sgj7 Doc 1 Filed 09/24/21 Entered 09/24/21 10:12:48 Desc Main Document Page 57 of 67

	otor 1 otor 2	Christon Crystal			Ca	ise number (if known)
Р	art 10:	Give [)etai	s About Er	nvironmental Information	
For	the pur	pose of Pa	rt 10,	the following	definitions apply:	
	hazardo	us or toxic	subs	tance, waste	II, state, or local statute or regulation concern s, or material into the air, land, soil, surface w trolling the cleanup of these substances, was	ater, groundwater, or other medium,
		-			roperty as defined under any environmental la tilize it, including disposal sites.	aw, whether you now own, operate, or
					an environmental law defines as a hazardous tant, contaminant, or similar item.	waste, hazardous substance, toxic
Rep	oort all n	otices, rel	eases	, and proceed	dings that you know about, regardless of whe	n they occurred.
24.	Has an law?	y governn	nental	unit notified	you that you may be liable or potentially liable	e under or in violation of an environmental
	✓ No ☐ Yes	s. Fill in th	e deta	ils.		
25.	☑ No	ou notified s. Fill in th		_	I unit of any release of hazardous material?	
26.	_	ou been a			al or administrative proceeding under any env	rironmental law? Include settlements and
	✓ No	s. Fill in th	e deta	ils.		
Р	art 11:	Give [)etai	s About Yo	our Business or Connections to Any I	Business
27.	Within busine	-	fore y	ou filed for b	ankruptcy, did you own a business or have a	ny of the following connections to any
		A member A partne An office	er of a r in a p r, dire	limited liability partnership ctor, or manag	loyed in a trade, profession, or other activity, eith y company (LLC) or limited liability partnership (L ging executive of a corporation se voting or equity securities of a corporation	
				ove applies. (apply above a	Go to Part 12. and fill in the details below for each business.	
Kis	sing Tr	ee Vineya	ards		Describe the nature of the business Winery	Employer Identification number Do not include Social Security number or ITIN.
	iness Nam FM 19 :				No. of the state o	EIN: <u>8</u> <u>0</u> – <u>0</u> <u>4</u> <u>2</u> <u>9</u> <u>8</u> <u>7</u> <u>6</u>
_		reet			Name of accountant or bookkeeper	Dates business existed
					-	From 2014 To Present
City			TX State	76254 ZIP Code	-	
C 8	& C Beviness Nam	erage			Describe the nature of the business Winery and Restaurant	Employer Identification number Do not include Social Security number or ITIN.
83 FM 1950					■ Name of accountant or bookkeeper	EIN: <u>8</u> <u>1</u> – <u>4</u> <u>8</u> <u>5</u> <u>4</u> <u>8</u> <u>1</u> <u>8</u>
Nun	nber Sti	reet			or accontinuit of bookkeeper	Dates business existed
_					-	From <u>2017</u> To <u>2020</u>
City	ay		TX State	76524 ZIP Code	-	

Case 21-31704-sgj7 Doc 1 Filed 09/24/21 Entered 09/24/21 10:12:48 Desc Main Document Page 58 of 67

Debtor 1 Debtor 2		Christopher Grider Crystal Grider Case number (if known)					
28.		2 years before you filed for bankruptcy, ncial institutions, creditors, or other par		ive a	a financial statement to	anyone about your business? Include	
	✓ No ☐ Yes	s. Fill in the details below.					
P	art 12:	Sign Below					
tha pro or t	t answer perty by poth. 18	the answers on this Statement of Finances are true and correct. I understand that fraud in connection with a bankruptcy U.S.C. §§ 152, 1341, 1519, and 3571.	t making a case can r	a fals esult	se statement, conceali It in fines up to \$250,00	ng property, or obtaining money or	
		stopher Grider ner Grider, Debtor 1			tal Grider Grider, Debtor 2		
ı	Date _	09/24/2021	Date		09/24/2021		
Did	you atta	ach additional pages to Your Statement	of Financia	al Aff	fairs for Individuals Fil	ing for Bankruptcy (Official Form 107)?	
	No Yes						
Did	you pay	or agree to pay someone who is not ar	attorney	to he	elp you fill out bankrup	etcy forms?	
	No						
	Yes. Na	ame of person				Attach the Bankruptcy Petition Preparer's Notice, Declaration, and Signature (Official Form 119).	

Case 21-31704-sgj7 Doc 1 Filed 09/24/21 Entered 09/24/21 10:12:48 Desc Main Document Page 59 of 67

Fill in this inf	ormation to i	identify your case	:	
Debtor 1	Christopher		Grider	
	First Name	Middle Name	Last Name	
Debtor 2	Crystal		Grider	
(Spouse, if filing)	First Name	Middle Name	Last Name	
United States Bar	nkruptcy Court fo	or the: NORTHERN D	ISTRICT OF TEXAS	
(if known)				

Official Form 108

Statement of Intention for Individuals Filing Under Chapter 7

12/15

If you are an individual filing under chapter 7, you must fill out this form if:

- creditors have claims secured by your property, or
- you have leased personal property and the lease has not expired.

You must file this form with the court within 30 days after you file your bankruptcy petition or by the date set for the meeting of creditors, whichever is earlier, unless the court extends the time for cause. You must also send copies to the creditors and lessors you list on the form.

If two married people are filing together in a joint case, both are equally responsible for supplying correct information. Both debtors must sign and date the form.

Be as complete and accurate as possible. If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write your name and case number (if known).

Part 1: List Your Creditors Who Hold Secured Claims

١.	For any creditors that you listed in Part 1 of Schedule D: Creditors Who Hold Claims Secured by Property (Official Form 106D).
	fill in the information below.

Identify the cro	editor and the property that is collateral	What do you intend to do with the property that secures a debt?	Did you claim the property as exempt on Schedule C?
Creditor's name: Description of property securing debt:	McLennan County Tax Office Business Assts	 ☐ Surrender the property. ☐ Retain the property and redeem it. ☑ Retain the property and enter into a Reaffirmation Agreement. ☐ Retain the property and [explain]: 	□ No □ Yes
Creditor's name: Description of property securing debt:	McLennan County Tax Office Business Assets	 ☐ Surrender the property. ☐ Retain the property and redeem it. ☑ Retain the property and enter into a Reaffirmation Agreement. ☐ Retain the property and [explain]: 	No Yes
Creditor's name: Description of property securing debt:	TD Auto Finance, LLC 2016 Dodge Ram (approx. 125,000 miles)	 ☐ Surrender the property. ☐ Retain the property and redeem it. ☑ Retain the property and enter into a Reaffirmation Agreement. ☐ Retain the property and [explain]: 	□ No □ Yes

Case 21-31704-sgj7 Doc 1 Filed 09/24/21 Entered 09/24/21 10:12:48 Desc Main Document Page 60 of 67

Debt Debt		•	Grider ler		Case number (if known)		
	Identify the cre	ditor a	and the property that is collateral		at do you intend to do with the perty that secures a debt?		I you claim the property exempt on Schedule C?
	Creditor's name:	TFN	3 - 1st National Bank of McGreo	gor 🔲	Surrender the property. Retain the property and redeem it.		No Yes
	Description of property securing debt:	Moth	er-in-Law's assets		Retain the property and enter into a Reaffirmation Agreement. Retain the property and [explain]:		
	Creditor's name:	TFNE	3 - 1st National Bank of McGreg	gor 🛚	Surrender the property. Retain the property and redeem it.		No Yes
	Description of property securing debt:	Lives	stock	☑	Retain the property and enter into a Reaffirmation Agreement. Retain the property and [explain]:	_	
Pa	rt 2: List	Your	Unexpired Personal Propert	y Lease	s		
fill in	the information	n belo	w. Do not list real estate leases. U	Inexpired	G: Executory Contracts and Unexp leases are leases that are still in eff the trustee does not assume it. 11 U	ect; th	e lease period has not
	Describe your u	unexp	ired personal property leases			Will	this lease be assumed?
	Lessor's name: Description of le property:	eased	Dorothy Johnson Home Lease 830 FM 1950 Eddy, TX 76524				No Yes
	Lessor's name: Description of le property:	eased	Mays Trust #2 Business Lease 800 S 7th St Waco, TX 76706				No Yes
	Lessor's name: Description of le property:	eased	Moser Development Corp Lease 109 W 3rd St Eddy, TX 76524			_	No Yes
Pa	rt 3: Sign	Belo	w ·				
			ry, I declare that I have indicated m is subject to an unexpired lease.	y intentio	n about any property of my estate tl	nat se	cures a debt and
_	s/ Christopher hristopher Gride			Crystal G			
D	ate <u>09/24/202</u> MM / DD / \		_ Date	e <u>09/24/</u> MM / D	2021 D / YYYY		

Doc 1 Filed 09/24/21 Entered 09/24/21 10:12:48 Desc Main Case 21-31704-sgj7 Document Page 61 of 67

B2030 (Form 2030) (12/15)

UNITED STATES BANKRUPTCY COURT NORTHERN DISTRICT OF TEXAS DALLAS DIVISION

In r	e Christopher Grider Crystal Grider		Case No.	
			Chapter	7
	DISCLOSURE	OF COMPENSATION C	F ATTORNEY FOR	R DEBTOR
1	Pursuant to 11 U.S.C. § 329(a) ar that compensation paid to me with services rendered or to be render is as follows:	nin one year before the filing of the	e petition in bankruptcy, or	agreed to be paid to me, for
ı	For legal services, I have agreed	to accept	\$	2,162.00
I	Prior to the filing of this statement	I have received		2,162.00
	Balance Due		······	\$0.00
2.	The source of the compensation p	paid to me was:		
	✓ Debtor	Other (specify)		
3.	The source of compensation to be	paid to me is:		
	✓ Debtor	☐ Other (specify)		
4.	I have not agreed to share the associates of my law firm.	e above-disclosed compensation	with any other person unle	ess they are members and
		pove-disclosed compensation with copy of the agreement, together v	•	
<i>-</i>	In ratura for the above disclosed f	ing I have agreed to rander level	particle for all connects of the	no hankruntav ogga ingledina

- 5. In return for the above-disclosed fee, I have agreed to render legal service for all aspects of the bankruptcy case, including:
 - a. Analysis of the debtor's financial situation, and rendering advice to the debtor in determining whether to file a petition in bankruptcy;
 - b. Preparation and filing of any petition, schedules, statements of affairs and plan which may be required;
 - c. Representation of the debtor at the meeting of creditors and confirmation hearing, and any adjourned hearings thereof;

Case 21-31704-sgj7 Doc 1 Filed 09/24/21 Entered 09/24/21 10:12:48 Desc Main Document Page 62 of 67

B2030	(Form	2030)) ((12/15)	١

6. By agreement with the debtor(s), the above-disclosed fee does not include the following services:

I certify that the foregoing is a complete statement of any agreement or arrangement for payment to me for representation of the debtor(s) in this bankruptcy proceeding.

09/24/2021 /s/ Andrew Oostdyk

Date

Andrew Oostdyk C.W. Martin Law Office, PLLC 701 W Belknap St Fort Worth, TX 76102 Phone: (817) 813-7777 Bar No. 24051139

/s/ Christopher Grider	/s/ Crystal Grider
Christopher Grider	Crystal Grider

Case 21-31704-sgj7 Doc 1 Filed 09/24/21 Entered 09/24/21 10:12:48 Desc Main Document Page 63 of 67

UNITED STATES BANKRUPTCY COURT NORTHERN DISTRICT OF TEXAS DALLAS DIVISION

IN RE: Christopher Grider Crystal Grider

CASE NO

CHAPTER 7

VERIFICATION OF CREDITOR MATRIX

know	The above named Debtor hereby verifies that reledge.	the attached	list of creditors is true and correct to the best of his/her
Date	9/24/2021	Signature	/s/ Christopher Grider Christopher Grider
Date	9/24/2021	Signature	/s/ Crystal Grider

Crystal Grider

Fill in this information to identify your case:													
Debtor		1		Christopher		Grider							
				First Name	Middle Name	Last Name							
	ebtor 2		lina)	Crystal First Name	Middle Name	Grider Last Name							
(5	pouse	5, II II	mig)	i iistivaille	Middle Name	Lastivanie							
Ur	nited S	State	s Ba	nkruptcy Court for the	: NORTHERN D	DISTRICT OF TEXAS							
	ase nu		r	-									
(11	know	11)						Check if this is an amended filing	J				
Of	ficia	I Fo	orm	122A-1Supp									
St	ater	ner	nt o	f Exemption f	from Presur	nption of Abuse	Und	ler § 707(b)(2)	12/15				
that filin	you g tog	are e	xem r, an	pted from a presum d any of the exclusion	ption of abuse. E	Be as complete and accu	irate as	ome (Official Form 122A-1), if you believe s possible. If two married people are , the other person should complete a					
P	art 1	:	lde	ntify the Kind of	Debts You Ha	ave							
1.	Are your debts primarily consumer debts? Consumer debts are defined in 11 U.S.C. § 101(8) as "incurred by an individual primarily for a personal, family or household purpose." Make sure that your answer is consistent with the answer you gave at line 16 of the Voluntary Petition for Individuals Filing for Bankruptcy (Official Form 101).								-				
No. Go to Form 122A-1; on the top of page 1 of that form, check box 1, <i>There is no presumption of abuse,</i> and sig submit this supplement with the signed Form 122A-1.							is no presumption of abuse, and sign Part 3. Th	ien					
		Yes.	G	o to Part 2.									
	1-0		D -		. M.: 1: (O	taa Baastataa Aaal		1					
P	art 2		De	termine whether	Willitary Servi	ice Provisions Apply	y to t	ou					
2.	Are	-		abled veteran (as de	efined in 38 U.S.C	c. § 3741(1))?							
		No. Yes.		Go to line 3.									
	Ш			olid you incur debts mostly while you were on active duty or while you were performing a homeland defense activity? O U.S.C. § 101(d)(1); 32 U.S.C. § 901(1).									
				No. Go to line 3									
				4		o of page 1 of that form, c with the signed Form 122		ox 1, There is no presumption of abuse, and sign	n Part 3.				
3.	Are	you	or ha	ave you been a Rese	ervist or member	of the National Guard?							
		No.	Co	omplete Form 122A-1	. Do not submit th	nis supplement.							
		Yes.	. W	ere you called to active duty or did you perform a homeland defense activity? 10 U.S.C. § 101(d)(1); 32 U.S.C. § 901(1)									
			No.	Complete Form 12	22A-1. Do not sub	mit this supplement.							
			Yes	. Check any one of the following categories that applies:									
				I was called to actifor at least 90 days		September 11, 2001, active duty.	Form 122A-1. On the top of page 1 of box 3, <i>The Means Test does not apply</i> Part 3. Then submit this supplement v 122A-1. You are not required to fill our Form 122A-1 during the exclusion peri	ou checked one of the categories to the left, go transcript 122A-1. On the top of page 1 of Form 122A-1					
				for at least 90 days	as called to active duty after September 11, 2001, at least 90 days and was released from active duty on which is fewer than 540 days before I this bankruptcy case.	from active duty on		x 3, The Means Test does not apply now and signt 3. Then submit this supplement with the signe 2A-1. You are not required to fill out the rest of Communication and the exclusion period. The exclusion period.	d Form Official				
				I am performing a I least 90 days.		e activity for at	per	iod means the time you are on active duty or are forming a homeland defense activity, and for 54 erward. 11 U.S.C. § 707(b)(2)(D)(ii).					
				I performed a home least 90 days, endi	ing on	, which is	If y	our exclusion period ends before your case is cluster and have to file an amended form later.	osed,				

fewer than 540 days before I file this bankruptcy case.

Case 21-31704-sgj7 Doc 1 Filed 09/24/21 Entered 09/24/21 10:12:48 Desc Main Document Page 65 of 67

Fill in this information to identify your case:						Check one box only as directed in this		
	ebtor 1	Christopher		Grider		form and in Form 122A-1Supp:		
"	GDIOI I	First Name	Middle Name	Last Name	— <u>[</u>	1.There is	no presumption of abu	se.
	ebtor 2	Crystal		Grider		1 2.The calc	ulation to determine if a	a presumption
(5	Spouse, if filin	g) First Name	Middle Name	Last Name		of abuse	applies will be made u est Calculation (Officia	nder Chapter 7
U	nited States E	Bankruptcy Court for	the: NORTHERN D	-	3. The Means Test does not apply now because of qualified military service but it could apply later.			
	ase number known)							
						Check if the	his is an amended filin	g
<u>Of</u>	ficial For	m 122A-1						
Cl	napter 7	Statement of	Your Current	Monthly Income)			04/20
acci info are mil 122	curate. If mo ormation app exempted fr itary service (A-1Supp) wi	re space is needed lies. On the top of om a presumption complete and file th this form.	l, attach a separate si any additional pages of abuse because yo Statement of Exemp	ed people are filing toget heet to this form. Include s, write your name and coud on ot have primarily of tion from Presumption of	e the line ase numb consume	number to v per (if knowr r debts or be	which the additional n). If you believe that ecause of qualifying	
	art 1: C	alculate Your C	Current Monthly I	ncome				
1.	. What is your marital and filing status? Check one only.							
Not married. Fill out Column A, lines 2-11.								
Married and your spouse is filing with you. Fill out both Columns A and B, lines 2-11. Married and your spouse is NOT filing with you. You and your spouse are: Living in the same household and are not legally separated. Fill out both Columns A and B, lines 2-11.								
Living separately or are legally separated. Fill out Column A, lines 2-11; do not fill out Column B. By checkin declare under penalty of perjury that you and your spouse are legally separated under nonbankruptcy law that a and your spouse are living apart for reasons that do not include evading the Means Test requirements. 11 U.S.								ies or that you
	Fill in the average monthly income that you received from all sources, derived during the 6 full months before you file this bankruptcy case. 11 U.S.C. § 101(10A). For example, if you are filing on September 15, the 6-month period would be March 1 through August 31. If the amount of your monthly income varied during the 6 months, add the income for all 6 months and divide the total by 6. Fill in the result. Do not include any income amount more than once. For example, if both spouses own the same rental property, put the income from that property in one column only. If you have nothing to report for any line, write \$0 in the space.							
						olumn A ebtor 1	Column B Debtor 2 or non-filing spouse	
2.	_	wages, salary, tip ayroll deductions).	s, bonuses, overtime	, and commissions				
3.	Alimony ar		yments. Do not includ	de payments from a spous	e			
4.	expenses of regular conf your depend	of you or your dependential of your dependential of your dependents, parents, and	roommates. Include re					

Case 21-31704-sgj7 Doc 1 Filed 09/24/21 Entered 09/24/21 10:12:48 Desc Main Document Page 66 of 67

	or 1 Christopher Grider or 2 Crystal Grider				Case number (if	known)
					Column A Debtor 1	Column B Debtor 2 or non-filing spouse
5.	Net income from operating a busine	ess, profession,	or farm			
		Debtor 1	Debtor 2			
	Gross receipts (before all deductions)					
	Ordinary and necessary operating - expenses			Сору		
	Net monthly income from a business, profession, or farm			here →		
6.	Net income from rental and other re	eal property				
		Debtor 1	Debtor 2			
	Gross receipts (before all deductions)					
	Ordinary and necessary operating - expenses			Сору		
	Net monthly income from rental or other real property			here →		
7.	Interest, dividends, and royalties					
3.	Unemployment compensation					
	Do not enter the amount if you conter benefit under the Social Security Act.					
	For you					
	For your spouse			_		
9.	Pension or retirement income. Do a was a benefit under the Social Securinext sentence, do not include any corallowance paid by the United States of disability, combat-related injury or disuniformed services. If you received a of title 10, then include that pay only the amount of retired pay to which you wounder any provision of title 10 other the	ty Act. Also, exc mpensation, pens Government in co ability, or death of any retired pay pa so extent that it do ould otherwise be	ept as stated in the sion, pay, annuity, or onnection with a of a member of the aid under chapter 61 pes not exceed the entitled if retired			
	Income from all other sources not I amount. Do not include any benefits payments made under the Federal law declared by the President under the N (50 U.S.C. 1601 et seq.) with respect (COVID-19); payments received as a humanity, or international or domestic pay, annuity, or allowance paid by the connection with a disability, combat-remember of the uniformed services. If separate page and put the total below	ct; t				
	Total amounts from separate pages, i	if any		_		

Case 21-31704-sgj7 Doc 1 Filed 09/24/21 Entered 09/24/21 10:12:48 Desc Main Document Page 67 of 67

Debtor 1 Debtor 2			nristopher Grider ystal Grider		Case number (if known)						
	Add line Then a	es 2 dd th	your total current monthly income. through 10 for each column. he total for Column A to the total for Co		Column A Debtor 1 Debtor 2 or non-filing s						
P	art 2:	L	Determine Whether the Means	lest Applies to You							
12.	Calcula	ate y	your current monthly income for the								
	12a. (Copy	y your total current monthly income fro	m line 11	Copy line 11 here	→ 12a.					
	ı	Multi	iply by 12 (the number of months in a y	year).		X 12					
	12b.	The	result is your annual income for this pa	art of the form.		12b					
13.	Calculate the median family income that applies to you. Follow these steps:										
	Fill in th	he st	tate in which you live.								
	Fill in th	he n	umber of people in your household.								
	Fill in th	he m	nedian family income for your state and	d size of household		13.					
			st of applicable median income amoun s for this form. This list may also be av		•						
14.	How d	o the	e lines compare?								
	14a.		Line 12b is less than or equal to line 1 Go to Part 3. Do NOT fill out or file O		box 1, There is no presumption of	abuse.					
	14b. Line 12b is more than line 13. On the top of page 1, check box 2, <i>The presumption of abuse is determined by Form 122A-2.</i> Go to Part 3 and fill out Form 122A-2.										
P	art 3:	S	Sign Below								
	By siç	gnin	g here, I declare under penalty of perju	ury that the information on this st	tatement and in any attachments is	true and correct.					
	χ <u>/</u> s	<u>/ C</u> r	nristopher Grider	χ /s/ (Crystal Grider						
			opher Grider, Debtor 1		stal Grider, Debtor 2						
	Da	ate_	9/24/2021	Date	e_ 9/24/2021						
		_	MM / DD / YYYY		MM / DD / YYYY						
	If you	che	ecked line 14a, do NOT fill out or file Fo	orm 122A-2							

If you checked line 14b, fill out Form 122A-2 and file it with this form.